PEDAGOGICAL CONSTRAINTS IN THE LEARNING OF UPPER PRIMARY CHILDREN WITH EMOTIONAL AND BEHAVIORAL DISORDERS IN CENTRAL PROVINCE REHABILITATION SCHOOLS, KENYA

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A THESIS SUBMITTED IN PARTIAL FULFILMENT FOR A MASTER OF EDUCATION DEGREE OF KENYATTA UNIVERSITY

March 2007
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Pedagogical constraints in the
DECLARATION

This Thesis is my original work and has not been presented for a degree in any other University.

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This work is dedicated to my mother Virginia Githinji, my husband, Robert Ngugi and to my daughters Stephanie Njoki and Liane Mugure.
ACKNOWLEDGEMENT

This researcher wishes to express her special appreciation and deep felt gratitude to her supervisors Professor Eunice B. Alade up and unto the time she resigned from the department of special education to go and join her family in the United States of America and in her place DR G.K. Karugu chairman special education department took over in helping the researcher to carry on with her research. Heart felt appreciation also goes to her second supervisor DR. Simon Rukangu, this is for their kind guidance, suggestions, encouragements and frank criticisms during the process of writing this Thesis.

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ABSTRACT

Emotional and behavioral disorders have been recognized as a problem in special education globally. However, in Kenya the government, religious organizations, and Non-Governmental Organizations have made little efforts in providing special education and to identify and assist children with emotional and behavioral disorders. The set out study intended to find out pedagogical constraints in the learning of children with emotional and behavioral disorders in central province Rehabilitation Schools. The objective of this study was to find out the pedagogical preparation of teachers and the instructional strategies employed by the teachers in these Schools. It also set out to find the adequacy and appropriateness of the resource materials used in teaching. Another objective was to find out strategies teachers used in managing behavioral problems of these children in class and the difficulties experienced by teachers in teaching children who are emotionally disturbed in Rehabilitation Schools. These objectives were considered to determine the pedagogical constraints in the learning of children with emotional and behavioral disorders in central province Rehabilitation Schools.

The population of the study was four hundred and sixty children in Rehabilitation Schools in Central province (one hundred and eighty girls and two hundred and eighty boys). The sample of the study was drawn from four purposively selected Rehabilitation Schools: one for girls (Kirigiti) and the others for boys, Thika, Othaya, and Wamumu. Purposive sampling was used to select upper primary classes 5, 6 and 7. Simple random sampling using the raffle design method was used to select a sample, which comprised pupils as follows: Kirigiti 45, Othaya 15, Thika 15, and Wamumu 15. The sample also comprised 12 class masters or mistresses, and 4 Headteachers. They were purposively
sampled out of a total number of fifty-four teachers (thirty-one males and twenty-three females) in the four Rehabilitation Schools.

Four instruments were used to collect data: a researcher-made questionnaire for teachers, for pupils and another one for the Head teachers. The questions had 12 items each. The questions were closed and open-ended. Observation schedule was also used.

The instruments were pre-tested at Kabete Rehabilitation School in Nairobi. This helped to enhance the validity and reliability of the research instruments. The split half technique of assessing reliability of data was employed. Reliability coefficient was calculated using the Spearman-Brown formula. A coefficient correlation of the instruments was established by using Pearson Product Moment Correlation Coefficient formula. In order to analyze data, descriptive statistics was used. Frequency tables were constructed to determine the distribution of the response. They were then converted into percentages.

The findings revealed in part that: There was inadequate pedagogical preparation of teachers, and a high percentage did not use proper instructional strategies in teaching in Rehabilitation Schools. There was also inadequate and minimum use of aids/resources. Teachers also experienced behavioral difficulties from pupils and the teachers did not use appropriate behavior modification strategies for these children. The results of the findings led to the conclusion there are pedagogical constraints in the learning of children in Rehabilitation Schools. The study therefore recommends that, teachers be properly trained, in-serviced and the government to provide adequate resources to improve learning in Rehabilitation Schools.
ABBREVIATIONS AND ACRONYMS

CEDC – Children in Especially Difficulty Circumstances

DPOs - Disabled Person’s Organizations

EFA - Education For All

IEPs - Individualized Education Program

KESSP - Kenya Education Sector Support Program

MDGs - Millennium Development Goals

MOES and T - Ministry of Education Science and Technology

SWAP - Sector Wide Approach UNESCO – United Nations Educational and Cultural Organization

UNICEF - United Nations Educational Fund
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CHAPTER ONE
INTRODUCTION

1.1 Background to the Study

Children who are emotionally disturbed have problems that could lead to delinquent behavior, including aggression, destructiveness and crime. They cause trouble to their parents, brothers, sisters, peers and teachers. Many of the children now identified for special education because of their emotional and behavioral disorders are children who require intensive, sustained help from well-trained and continuously available personnel (Kirk and Gallagher, 1983).

Emotional disturbance in children has been recognized as a problem in special education for well over a century (Kauffman, 1981). The advent of American public law 94-142, of 1975, which is, Education Act for all handicapped children is the forerunner of greater flexibility in, and focus on, quality education for all handicapped children (Reinert, 1986). However, in Kenya, special education and particularly provision of quality instruction and related services for children with emotional and behavioral disorders has not been adequately emphasized. This is by the government, non-governmental organizations, religious bodies and other stakeholders concerned with the education of children with special needs (MOEST, 2001).

Grozenick and Huntze (1983) note that, most emotionally disturbed children are not receiving special education and related services. It is also unfortunate that, few schools
globally have not developed systematic and effective methods of screening and providing effective education for these learners. Many schools have neither the money, resources, and nor the personnel to do so. It was for this reason that this study was designed to find out pedagogical constraints in the learning of children with emotional and behavioral disorders.

One of the objectives of the Ministry of Education in special education is that children should acquire literacy, numeracy and manipulative skills (Republic of Kenya, 1981). Unfortunately for a great number of children who are emotionally disturbed, education has a low priority. The path towards academic success is difficult and uncertain. They have a limited understanding of what the school is trying to do; based on their own social and personal problems that distract them from academic work (Gallowey, Bloomfield, and Ball, 1982).

Delinquency and crime, resulting from the emotional state of these children may make them to be removed from their homes and local schools for residential treatment. Their behavior is considered morally wrong in the eyes of the law (Kauffman, 1981). Rehabilitation Schools in Kenya as stipulated by Children’s Act [CAP 586] of the Laws of Kenya take several of these children who have been regarded by schools as too difficult to teach, and have also violated legal codes, have been caught and adjudicated (Kenya Gazette Supplement, 2001). Rehabilitation Schools should therefore cross boundaries into specialist’s strategies. When established in Kenya, the Institutions were expected to resocialize young offenders, build their self-esteem, and fit them back to society, but they
turned out to be prisons for young offenders (Ndunda, 1978). It was for this reason that the researcher needed to find out if effective learning (especially by use of specialist learning strategies and behavior modification strategies appropriate for these children) was taking place in these Rehabilitation schools. It was also necessary to find out whether the duration of education was adequate enough to benefit these children fully. This is because, their stay in these Rehabilitation Schools depend on court orders that can be revoked at any time and this was a concern of this study.

In order to uplift the education of emotionally disturbed learners and to show that these children are worth teaching, Koech (1999) recommended that, Approved Schools and juvenile remand probation centres do away with the image of jail term schools and embrace special education approach. He proposed that institutions discard terms like approved, probation, juvenile to Rehabilitation Schools. This was implemented in 1\textsuperscript{st} March 2002 at the time of Children’s Act implementation (Kenya Gazette Supplement, 2001). Unfortunately probation is still used, so is remand. The present study was therefore established to find out if and to what extent special education for these children was effectively being provided.

Rehabilitation Schools in Kenya cater for two categories of children. The first are those who have committed crimes. They are committed for three years however serious the crime is under section 47 of the Children’s Act [CAP 586] of the laws of Kenya. The second group of children is the abandoned and neglected, orphans and destitute, battered children and other children in need of special protection and care under section 119 of the
same Act. They are committed until they attain the age of 18 years or a shorter time as the
court may decide (Children’s Act [CAP 586]). The children in need of protection and care
and those convicted of crimes learn together. Due to peer influence, even after leaving this
program these children are not any better, they continue being a liability to the society as
was the assumption of this study. The researcher therefore needed to find out if and to
what extent this peer influence interfered with the learning of these children manifesting
behavioral difficulties as it was a main thrust of this study.

Another major difficulty in responding to the learning of these children is that, the
programs to address behavior disorders can predominate to the extent that their academic
needs are neglected (Corbet, 2001). This necessitated the designing of the present study to
find out pedagogical constraints in the learning of children with emotional and behavioral
disorders in Rehabilitation Schools.

1.2 Statement of the Problem

Emotional and behavioral disorders is one of the worldwide phenomena faced by educators
and scholars. Cases of emotional and behavioral disorders are on the increase in the world
and particularly in Kenya (UNESCO, 1985). To assist and help these children,
governments of many countries in the world have established special schools for children
with exceptionalities to offer special education and related services (UNICEF 1997). In
Kenya it is done through Rehabilitation Schools. Unfortunately, there is a feeling these
schools are not doing enough. Improvement is required for maximum dissemination of
services. This is to say special education and related services being offered are not to the
anticipated standard in terms of trained teachers, resources and strategies used for learning. Again the institutions emphasis is on rehabilitation and correctional purposes rather than academic excellence.

In addition, most of the children who have been through this Rehabilitation Program are not any better. Due to negative peer influence, they continue being bigger criminals and school dropouts, therefore a liability to the society. The duration of education is also, not adequate enough to benefit these children fully since their stay in these programs depend on court orders that can be revoked at any time. Hence the main problem of the study was that, the critical factors in the learning of children with emotional and behavioral disorders in Rehabilitation Schools have not been well conceptualized.

1.3 Purpose of the Study

The purpose of the study was to find out pedagogical constraints in the learning of children with emotional and behavioral disorders in Central Province, Rehabilitation Schools. The researcher also made recommendations, which could facilitate in solving these problems for effective and successful learning of children with emotional and behavioral disorders.

1.4 Objectives of the Study

The objectives of the study were to:

(1) Find out the pedagogical preparation of teachers who teach in Rehabilitation Schools.
(2) Examine the instructional strategies used in teaching children with emotional and behavioral disorders.

(3) Find out the adequacy and appropriateness of the teaching resources for children with emotional and behavioral disorders.

(4) Investigate difficulties teachers encounter when teaching children with emotional and behavioral disorders.

(5) Find out the strategies teachers employ in managing emotional and behavioral problems in the classroom.

1.5 Research Questions

Specifically, the study aimed at finding answers to the following research questions:

(1) Was there pedagogical preparation of teachers who teach in Rehabilitation Schools?

(2) Were instructional strategies used in teaching appropriate to children with emotional and behavioral disorders?

(3) Were the teaching resources adequate and appropriate to the learning needs of children with emotional and behavioral disorders?

(4) What difficulties did teachers encounter when teaching children with emotional and behavioral disorders?

(5) What strategies did teachers employ in managing emotional and behavioral problems of Children in the class?
1.6 Significance of the Study

It was hoped that the findings of this study would yield information for use by the government. This is in developing a policy, curriculum, and teacher preparation (training). The findings would also help in formulating in-service course programs that are necessary for implementation of an effective educational program for children with emotional and behavioral disorders in Kenya. The study findings would be of use to teachers of these children about their roles in ensuring that effective learning is taking place so as to benefit these children. For example, being more motivated and providing intervention strategies to enhance quality of learning. The study findings would help the government, inspectorate, concerned Non-Governmental organizations, and religious bodies to ensure that education of these children receive if necessary appropriate services. These include facilities, and qualified personnel to facilitate effective learning of these children. It was also anticipated that the findings of this work would sensitize other researchers and readers in other areas not covered by the researcher in relation to the education of children with emotional and behavioral disorders. The study findings would benefit the children by receiving appropriate education that would help them become useful members of the society.

1.7 Limitations of the Study

This study was among other factors affected by limitation of time in carrying out the fieldwork. Data collected did not involve or include other Rehabilitation Schools in the republic. The study was confined to only four Rehabilitation Schools for children with emotional and behavioral disorders in central province, thus the sample of the study was
small. The province was chosen because it houses the only Rehabilitation School for girls in Kenya. The effects found mainly reflected the situation in the province. Hence the findings were not representative of all Rehabilitation Schools in Kenya. The study limited itself to finding pedagogical constraints in the learning of children with emotional and behavioral disorders. The study was limited to upper primary school children in Rehabilitation Schools and not all the children in the schools.

1.8 Assumptions of the Study
The study was based on the assumptions that, its findings on the pedagogical constraints in the learning of these children and the suggested solutions can contribute to effective planning and implementation of a good education program for them. The researcher also assumed that teachers in Rehabilitation Schools use varied teaching styles. Further assumption was that there were relevant resources for teaching children with emotional and behavioral disorders. The researcher assumed that the respondents of the study would be as honest as possible. Further assumption was that the sample would be representative of the population of the study.

1.9 Theoretical Framework
This study was based on two theories. Maslow’s theory of human needs, and a social learning theory advanced by Bandura.

1.9.1 Maslow’s Theory of Human Needs:
Maslow asserts that there is a hierarchical structure of human needs. He further stipulated
that, one level of needs leads to the other. Satisfaction of one-need triggers the next. Maslow conceived the dynamic causes of Behavior as being deprivation and gratification of these human needs. He came up with a pyramidal kind structure of needs as shown in figure 1 below:

**Figure 1:1 Maslow’s Hierarchical Structure of Human Needs**

![Diagram of Maslow's Hierarchical Structure of Human Needs]

*Source: Adapted from Maslow’s (1970 p, 220) motivation and personality theory.*

According to this theory, some individuals because of their circumstances find it very difficult to satisfy even the lowest needs. The strongest needs of all are the physiological needs. They include the need for food, drink, sleep, and water. Security/safety needs refers to an individuals need for assurance of no threats, predictive and non-threatening environment. Maslow noted that in most cases these lower needs remained unsatisfied. Because of their circumstances children with emotional and behavioral disorders may not satisfy their physiological needs. This could interfere with their need to learn.
The theory further describes two kinds of esteem needs. The need for self-respect, achievement, confidence, prestige and recognition. When these needs are not met a child feels discouraged, weak and inferior. Children who are emotionally disturbed lack confidence, they are anxious for recognition and attention especially from their peers. The desire to belong to a peer group can make these children openly defy a teacher and therefore refuse to learn. Block et al. (1989) further supported Maslow and said that, events like family separation, divorce, illness and death of a family member would make the child strive for safety or security first before schoolwork. Therefore the child shows more misbehavior and poorer achievement.

When esteem needs are thwarted, they produce feelings of inferiority, weakness and helplessness. Children identified as troublesome in schools often lack self-respect and have low self-esteem, which make them, perform poorly in their academic work. This is the case of children with emotional and behavioral disorders. Maslow's theory therefore stipulated that there are a number of inhibiting variables to effective learning of these children such as deprivation of being needs and deficiency needs due to various circumstances like divorce, death, illness, peer pressure, and so on. All these components are interrelated and could affect their learning. Maslow's theory further encouraged a more careful study of all situations that foster and fulfill satisfaction of our basic needs and which can help children learn; among them are positive educational settings like trained teachers, resources for learning and a good classroom atmosphere. It was in this context that the researcher sought to find out pedagogical constraints in the learning of these
children with emotional and behavioral disorders.

1.9.2 Bandura’s Social cognitive learning Theory

Bandura developed a social learning theory in 1978. Bandura asserts that, reinforcement administered by significant others for example parents and teachers were important in promoting good behavior. Therefore, teachers dealing with children with special needs should foster positive reinforcement so as to promote high achievements in their academic work. One approach to the problem of disruptive behavior is to create a climate inimical to its development. This approach focuses on the school as a social and educational institution which can create its own ethos of stability (Galloway et al, 1982). Children with emotional and behavioral disorders have a low self-efficacy, which can interfere with their need to achieve the being needs for example, learning.

Concentration for these children should therefore be on the social and learning environment. This provides children with a greater opportunity for achievement and success, with a corresponding reduction in opportunity for the boredom and alienation, which are often associated with disruptive behavior (Galloway et al, 1982). Bandura’s theory therefore showed that there are a number of inhibiting variables to the learning of children with emotional and behavioral disorders for example, lack of reinforcement by teachers and parents and poor classroom atmosphere among others.
1.10 Operational Definition of terms

An authorized officer means a police officer, an administration officer, a social worker, a field worker, a chief appointed under the chief’s act a labor officer or an official authorized by the Director of Children’s Services to ensure the welfare of the child.

Behavior modification refers to therapy that aims at changing behavior by changing the way the child feels about oneself or himself/herself’s experiences.

Behavior disorders is a term used to describe the deviation from appropriate behavior for a given age, which significantly interferes with ones own learning and development or that of others.

Children in need of care and protection refers to those children committed in the Rehabilitation Schools to be provided with protection and care. They have no parent or guardian, or they have been abandoned by parents or the guardian. They include one who is homeless or a beggar, one who is getting into bad company, one who is exposed to domestic violence, abandoned, neglected, abused, lost and found children. They are committed under section 119 of Children’s Act Cap 586 laws of Kenya.

Children in Need of Discipline and Care are those who have committed crimes. They are committed for 3 years however serious the crime is under section 47 of the Children’s Act(CAP 586) of the Laws of Kenya.

Children’s Act Cap 586 is a law enacted to promote the well being of children in Kenya. The Act is a merger of repealed guardianship of Infants Act, Adoption Act and Young Person’s Act which have been harmonized.
Children’s remand homes means a home established under section 50 of the children’s Act for the detention of children.

Child refers to any human being aged between 7 to 18 years under the age of majority in Kenya who is assumed not to dealt with by the court.

Court will mean children’s court established under Children’s Act (CAP 586) laws of Kenya.

Crime refers to any act that at time of its commission is punishable by the law.

Disadvantaged children refers to children who do not receive their basic needs of food, shelter, clothing, security and education especially due to their difficult circumstances. They are also referred to as children in especially difficult circumstances (CEDC). They include disabled and street children, Aids affected children, orphans and Aids orphans, child brides, child workers, child prostitutes, refugees, neglected, abandoned, abused, battered children and children of nomadic parents.

Disorders include parents and or teachers management styles of the school or home environment, the social cultural values of the family, the social and economic climate of the community, the responses of peers and siblings and the academic, intellectual, social emotional characteristics of the child with behavioral disorders. These children have trouble responding to the social and academic tasks that are essential part of their schooling.

Inappropriate behavior refers to acts that are not acceptable by the law and society at large and are exhibited by children who have been placed in Rehabilitation Schools for discipline and protection. Therefore different types of emotional and behavioral disorders
such as; acting out, withdrawal, defensive behaviors among others.

**Juvenile delinquent** refers to a child between the statutory juvenile court age of ten and sixteen years who commits an act which when committed beyond this statutory children’s court age would be punishable as a crime or as an act injurious to other individuals or the public, that is the state or the Government.

**Pedagogical constraints** refers to lack of use by teachers of relevant resources and strategies in teaching which therefore can hinder learning of children in schools.

**Rehabilitation Schools** (Formally known as Approved Schools) where children manifesting behavioral problems are referred to for provision of educational services and social rehabilitation. Other disadvantaged children are also taken care of in these schools. They are established under section 47 of the Children’s Act, a child can stay, be taken care of and get rehabilitated into a good and acceptable order.

**Rehabilitation** as used in this study refers to the process of restoration into a good and acceptable order. It is a process of healing convicted persons out of their criminality behavior and to be law-abiding citizens.

**Special education** refers to a form of education provided for an exceptional child who would otherwise not benefit from regular educational programs.
CHAPTER TWO
LITERATURE REVIEW

2.0 Introduction
Past studies related to the learning of children with emotional and behavioral disorders were revised in this chapter in order to arrive at a better understanding of these children. The literature was organized under sub-headings:

2.1 Meaning and History of Emotional and Behavioral Disorders
It is not easy to explain the meaning of emotional and behavioral problems in children. This is because they depend to a large extent on the attitude of the perceiver. Again, in our pluralistic society, behavior that is acceptable in some groups or subcultures is unacceptable in others. Definition and meaning therefore, must allow for cultural differences (Kirk, Gallagher & Anastasiow, 2003).

However, there are several commonly used definitions of the child with emotional and behavioral disorders, which can help teachers, physicians, psychologists, and others, interested in their education. According to the Individuals with Disabilities Education Act (IDEA), pl 101-476, a child with emotional disturbance is one who, because of organic and/or environmental influences, chronically display an inability to learn that cannot be explained by intellectual, sensory, or health factors. When a child shows an inability to build or maintain satisfactory interpersonal relationship with peers and teachers, and
portray inappropriate types of behavior or feelings under normal circumstances, he or she is emotionally disturbed.

Two centuries ago, children with behavioral problems were believed to be possessed by the devil, insane, or mentally deficient. When attention was paid to them at all, they were shut away in large institutions with very little attention directed to their education. The professionals who dealt with them were largely clergy (if they were ‘possessed’, it was up to the “holy men” to cure them) or physicians. Furthermore in the late 1800’s, children who were manifestly different from their age mates were put into special ungraded classes, but with little attention paid to their special needs (Kirk, Gallagher & Anastasiow, 2003).

After world war two, the responsibility for such children gradually shifted from the mental health professionals to education. The schools assumed greater responsibility for their treatment and it became increasingly behavioral and emotional. John F. Kennedy, one of the most articulate presidents to speak on behalf of handicapped children did much to stimulate this involvement. On February 5, 1963, President Kennedy of USA made the following statement: “I have sent to the Congress today, a series of proposals to help fight mental illness and mental retardation. These two affiliations have long been neglected. They occur more frequently, affect more people, require more prolonged treatment, and cause more individual and family sufferings than any other condition in American life. It has been tolerated too long. It has troubled our national conscience, but only as a problem unpleasant to mention, easy to postpone, and despairing of solution. The time has come for a great national effort (Public Papers of the Presidents of the United States, 1963:137). In
line with this recommendation this study intended to find out the extent to which this lack of a well defined meaning and lack of trained personnel in this area has hindered the provision of learning and a good education program for these children, as was the assumption of this study. Progress in the education of handicapped children was reached in 1975 when president Gerald Ford signed public law 94-142 (Education For All Handicapped Children Act). This action has provided a continuing emphasis on programs for emotionally disturbed (Reinert, 1986). However a Survey conducted by UNESCO (1985) indicated that, in Eastern and Southern African countries, only Kenya and Zimbabwe have education programs for these children. The most utilized system in Kenya is Rehabilitation Schools. A transient solution, with children being placed in the program until they have "reformed" or until their former non-social behaviors are less of a threat to the society. It was therefore significant to establish the extent to which this transient solution affected their academic needs.

2.2 Rehabilitation Schools

In Kenya, education of children with emotional and behavioral disorders is provided in Rehabilitation Schools. The first and oldest program in Kenya, concerned with the education and welfare of these children was, started at Kabete reformatory school. It was in 1908, under the then, Prisons Department (Clifford, 1978). Kabete was later renamed Approved School in line with British system, under the newly introduced juvenile ordinance 1934 in Kenya. It was to provide detention and training for those children who the courts found guilty of criminal offence. Events of Second World War in 1940's, as
well as the later state of emergency in Kenya early in 1950’s, created more problems therefore, more children got into trouble with the law. Hence, the establishment of more Approved Schools (Clifford, 1978).

The Juvenile ordinance of 1934, the prevention of cruelty to, and neglect of children ordinance 1955, as well as vagrancy, conferred more and new functions to the department of children in the Ministry of Home Affairs like protection, discipline, and care of neglected or abandoned children. Cruelly treated and vagrant children in the country were later added to the department’s responsibility. The above ordinances and Acts were consolidated into the Children and Young Persons Act [CAP 141] of the laws of Kenya 1963 and revised in 1964 and in 2001 Children’s Act [CAP 586] (Kenya Gazette Supplement, 2001).

In Kenya currently there are eleven Rehabilitation schools. Ten for boys and one for girls(Kirigiti). However, due to congestion in Kirigiti Rehabilitation School for girls in Kiambu, the government has opened up Dagoreti Rehabilitation School for girls in Nairobi to offload the congestion in Kirigiti. Unfortunately the children are still committed under Kirigiti and of loaded to Dagoretti. This makes Kirigiti the only Rehabilitation School receiving girls in Kenya. This made it necessary for the researcher to find out the extent to which congestion of children in the Rehabilitation Schools affected the learning of these children in terms of provision of adequate resources.
There are voluntary organizations and local authorities that also take care of these children. For example, the Undugu Society of Kenya. This society offers a number of programs for street children and potential street children in the slums and their parents. This is helpful since the government Rehabilitation Schools do not have enough capacity to accommodate these socially maladjusted children. They are committed to the care of these approved voluntary societies under section 63 or appointed local authorities under section 58 of the same Act (Kenya Gazette Supplement, 2001).

The court for the respective crime committed and protection needed commits these children. It's done through the recommendation of probation officers and field workers with the consent of the parents/guardians. The children are then taken to Getahunruru Rehabilitation Centre in Nairobi for orientation into life in the Rehabilitation Schools. This rehabilitation program serves only a small number of these children. Those not reported by probation officers, social workers or educators remain unserved (Ndurumo, 1993). It was therefore important to find out the extent to which children in Rehabilitation Schools were receiving special education and related services. It was also necessary to find out why majority of these children remained unserved and suggest methods through which some of these problems could be alleviated.
2.3 The Millennium Development Goals and their Implications to Persons with Disabilities in Kenya.

The Millennium Development Goals (MDGs) were adopted in the year 2002 by all the world's governments as a blueprint for building a better world on the 21st century. The government of Kenya also joined in the adaptation of the goals. One of the goals was to achieve universal primary education and this included the education of children with disabilities (Hope, 2003).

United Nations Centre for Human Rights estimates that, only 2% of persons with disabilities have access to education, rehabilitation and appropriate basic services (access to these services is essential to enable children with disabilities to attend school) this includes children with emotional and behavioral disorders. The active cooperation and participation of all members in the community is important for achieving sustainable development. National and International Organizations in the World community, including Disabled Person's Organizations (DPOs), have an important role to play in the awareness-raising of disability issues, and the empowerment of persons with disabilities and their careers in order to participate in development (Hope, 2003).

The strengthening of national DPOs and their alliances with relevant organizations in their own country, Kenya included, and in their donor countries, should promote good governance with more accountable governments in relation to disabilities in developing countries (Department for International Development, 2000). According to ACFID Issue
Paper Disability and the Millennium Development Goals (2000), the inclusion of persons with disabilities into mainstream services are important, along with specialized interventions where necessary, and would constitute a twin truck approach to disability in all developing activities. The consideration of the rights and needs of persons with disabilities, together with the prevention of the causes of disabilities, is essential if the overall aim of the Millennium Development Goals to halve absolute poverty is to be achieved by 2015.


According to KESSP (2005), in pursuit of the (MDGs) goals and Education For All (EFA) goals coupled with the task of delivering the policies as set in the Sessional Paper No. 1 of 2005 MOES and T has been working with Sector Wide Approach (SWAP) to secure funding for the Kenya Education Support Programme (KESSP) whose goals are to ensure that all children including girls, children in difficult circumstances and those in marginalized vulnerable groups, have access to and complete free and compulsory primary education by 2010.

Despite the current initiatives by the Government, access and quality in education for those with special learning needs including children with emotional and behavioral disorders is limited. In order to increase access and improve quality, the Government will:

(1) Strengthen the assessment program in order to facilitate identification of learners with special needs.
(2) Integrate special education program in order to facilitate identification and placement of learners with special needs.

(3) Collaborate with and Co-ordinate other providers of special education

(4) Provide instructional materials through the waving of duty on specialized equipment and materials as well as provide incentives for local production of such equipment to reduce cost of providing special needs education.

(5) Develop a national policy that comprehensively defines areas of all special needs, and specific needs identified.

2.5 Strategies to Address Key Policies in Special Needs Education in Kenya as Outlined by KESSP Report

According to KESSP report (2005/2006), in order to implement the above policies, the following strategies will be employed by the government;

(1) Develop a program to create public awareness on the need to send children with special needs for early assessment and placement;

(2) Design and implement programs that enhances inclusive education in all institutions;

(3) Strengthen institutions supporting special needs education, for example KISE and KIE.
(4) Encourage research in the field of special education;

(5) Strengthen the capacity of the MOES and T and the schools to ensure effective management of all the needs of the children;

(6) Implement integrated special education programs in pre-service and in-service teacher training;

(7) Adopt a flexible curriculum that is responsive to learners with special needs and develop learning and materials to support the curriculum; and

(8) Provide funds in form grants at all special boarding schools.

This will be the basis upon which the government MOES and T, individuals, community private sector, NGOs and development partners will jointly support the education sector of all including persons with disabilities for the period 2005/6 to 2009/10.

2.6 Behaviors Exhibited by Learners with Emotional and Behavioral Disorders

Children with emotional and behavioral disorders are in conflict with their environment. They could be having a relationship problem with their teachers or a peers, they might be in conflict with themselves, or they may be victims of uncontrollable circumstances in their homes. These conditions cause them to exhibit behavioral difficulties that interfere with their learning, hence the need for this study. (Reinert, 1986) outlines four basic behavioral types as:
Acting-out behaviors: These include; talking in class without regard for others, not attending classroom directions, exhibiting out of seat behavior, aggressive in behavior towards others, slamming doors, talking back to the teacher and other authority figures making loud clicking noises; yelling in the classroom and in the hallway. Most are observable behaviors that tend to occur in clusters rather than in isolation.

Withdrawing behaviors: The withdrawing child is often inconspicuous in the classroom and therefore can be ignored by the teacher, but the following are examples of behaviors that affect their learning: Not responding when spoken to, thumb-sucking, chewing on pencils, or on clothing, failure to talk even though the skill to talk is properly developed, sitting and playing alone when other children are nearby and rocking or other self-stimulating behavior. If not attended to the withdrawing child cannot learn.

Defensive behaviors: These are behaviors that allow the children to protect themselves from failure, embarrassment, and from the truth and to take the focus from themselves. This makes it hard for teachers to impart learning. These include: lying, sleeping during class, daydreaming, running away from school, practical jokes, becoming sick at specific times during the day, and crying.

Disorganized behaviors: It is difficult to maintain these children in the classroom except in a one-to-one relationship with the teacher. These children are confused in terms of time and place (out of touch with reality). They might not have speech skills and will often not relate to people. Recognizing the difficulties that these children have, and employing good
strategies to manage them will help teachers to plan programs that will help them to learn. This made it important for the researcher to find out behaviors exhibited by learners with emotional and behavioral disorders and the extent to which the behaviors interfered with their learning and suggest ways they could be modified.

2.7 Strategies Employed to Manage Emotional and Behavioral Problems.

Few experiences are as disturbing to teachers as trying to teach children who are chronically unhappy, or driven to aggressive, antisocial behavior. However, there are strategies which, teachers can employ to manage behavior problems in class (Ndurumo, 1993). Teachers need to know when to reward by giving attention to the child when he behaves appropriately and when not to reward by ignoring the child for shouting in the classroom in order to get the teacher's attention (Ndurumo, 1993). The teacher's behaviors, tone of voice, words of praise, giving attention, smiling, touching, and being near, or patting on the back are good ways of managing behavior (Becker et al, 1975). Such teacher pedagogical characteristics were subject to investigation by the study.

The human touch, which embodies qualities such as being real, authentic, accepting and trustworthy is essential in managing children with emotional and behavior problems. The teacher who empathizes with their feelings and experiences, and seeks to communicate with them in accepting, non-judgmental ways, develop a bond of trust with them (Ndurumo, 1993). It was therefore important for the researcher to find out if and to what extent these behavior modification strategies were being employed by teachers in Rehabilitation Schools to facilitate the learning of these children. The teacher's non-verbal
behavior is also an important point for effective behavior management. Use of posture, eye contact, gesture and dress will enhance the verbal content of any interaction. Posture indicates interest and enthusiasm, eye contact is willingly established and maintained, gestures are firm and decisive, and the clothes worn are consistent with having status. Good teachers give the class the impression that they have eyes at the back, they move round the classroom varying the position and constantly scanning the room to monitor children's behavior and activities (Solity, 1992).

Another strategy is to given children tokens as positive reinforcers when they display appropriate behaviors or perform well academically. Tokens can be anything that enables teachers to give children credits. Some teachers use poker chips, pennies, check marks, stars, stickers, coupons, or any other item that can be accommodated by children. (Woolfolk, 1990). These reduce the probability of the behavior problems recurring and therefore create a positive atmosphere within the classroom that enhances learning. The researcher intended to find out if and to what extent to these reinforcers were being used in Rehabilitation Schools.

Good Behavior Games are fun activities children can play in teams with a focus on appropriate behaviors. According to Ellenwood and Felt (1989). The games take advantage of peer pressure. Teachers may have different groups within the classroom; such as rows of children compete for certain privileges. This can be enjoyable to children and will help them to learn if it is practiced in the Rehabilitation Schools.
Children with emotional and behavior disorders should be trained on how to manage their own behavior. They can be helped by use of a self-monitoring mood chart. This approach enables children to chart their moods and feelings. Safran and Safran (1984) describe a chart that uses five different feelings; Sad, withdrawn, bored, frustrated, and mean. Children circle how they feel in each of these areas. These are easy and inexpensive systems that help children learn how to monitor their own feelings and learn.

Another technique that can be used to control the behavior of children is time out. Children who have violated classroom rules are sent to a secluded place in the room or in a space nearby with instructions to come back when they feel they have gained control of themselves. Time-out takes the children away from possible negative interactions with other children and gives him or her a chance to cool off (Kithure, 2002).

Medication is an important technique for managing children’s behavior. The most commonly used type of medication for children with behavior disorders is the use of stimulant drugs, such as Ritalin and Dexedrine. These drugs generally result in a very quick increase in attention. Drugs such as Thorazire Haidol, and Mellonill result in the reduction of aggressive behaviors (Forness and Kavale, 1988). Once the teacher is able to manage and direct the learner’s behavior in the classroom, he or she can begin to apply the process of systematic instructions to achieve good academic performance. The study therefore intended to find out if and to what extent teachers in Rehabilitation Schools employed behavior modification strategies to enhance learning.
2.8 Instructional Strategies used to teach the Behavioral Disordered learners

Gallager (1979) has developed specific ways of providing instruction for the emotional and behavioral disordered children in a classroom setting: Initial instruction should focus upon the individual child. This can only be achieved by use of an Individualized Educational Program (IEP) which is a common approach in Special Schools. In deciding what to teach, the teacher should identify the learner's strengths and challenges (Moore, 1998). It was therefore important to find out if and to what extent this was being practiced in the Rehabilitation Schools to enhance the learning of these children.

After identifying the strengths and challenges of individual learners in the classroom, the teacher should use Task analysis. This is the process of breaking down a task to be learnt into smaller steps. It is then presented to the pupils in sequence, from the easiest to the hardest. Learning the whole task in a single lesson can be overwhelming especially for learners with emotional and behavior disorders. The task to be learnt must be described in observable and measurable terms. This will help the teacher know whether learning has taken place or not (Otiato and Kathenya, 1994).

The use of direct instruction has been found effective in teaching and mastering of content for learners with special needs in education. The teacher should begin the lesson by identifying its objectives, and then provide a quick review of previously learnt skills. Specific teaching points should then be presented to learners in a sequential manner. Key points should be explained to learners using clear and explicit statements accompanied by
relevant example to help make abstract information concrete (Reinert, 1986). This would facilitate learning, as was the assumption of this study.

After presenting each new point, a teacher should check for the learner’s understanding. This can be done by asking questions and be followed by either supportive or corrective feedback at all times. A teacher should offer time for seatwork activities. This should be directly related to the content taught. At the end of the lesson there should be summary of the main points and the evaluation of learner’s mastery of content (Reinert, 1986).

Co-operative learning approach is a method of organizing learning in such a way that, learners work with their peers towards a shared academic goal rather than working separately from their peers. Small groups of learners usually fewer than six work together on an instructional task (Moore, 1998).

Group teaching is also an important technique in meeting the needs of learners exhibiting diversity in behavior. The researcher assumed that this was being practiced in the Rehabilitation Schools. An ideal group should consist of at least five learners but not more than eight. Achievement grouping, interest grouping and partner grouping are some types of group teaching that have been found effective in promoting learning. The researcher intended to find out if and to what extent these teaching techniques were being carried out in the Rehabilitation Schools.

Mediated learning experience (MLE) is an effective way of teaching learners with special needs. Through question and answer techniques, the learner is encouraged to actively
participate in learning. The teacher guides the children step by step by matching the learner’s needs, interests, abilities and experiences to the task to be learnt. This is done until the child gains confidence in the work being taught (Otiato and Kathenya, 1994).

In order for learning to take place effectively, a teacher should limit assignments. Work should be presented in assignment formats that the child can tolerate. Children in conflict often have a tendency to give up too easily when assignments appear so overwhelming that failure is certain (Gallager, 1979). It was therefore important to establish the nature and extent to which teachers in the Rehabilitation Schools used appropriate instructional strategies to facilitate the learning of these children.

2.9 Training of Teachers for Children with Emotional and Behavioral Disorders

Children with emotional and behavioral disorders need to be given the right professional assistance so as to learn, as was the assumption of this study. Useful work with these children depends largely on the expertise of the teacher. Therefore, teachers should be professionally trained and certified. While in training the basic courses for the teachers ought to cover these areas: special education, Primary/ early childhood education, child psychology, sociology, guidance and counseling, and Practicum (Molloy, 1972). It was therefore important to find out if teachers possessed such training in Rehabilitation Schools.
Galloway et al (1982) says that in identifying and teaching children with behavioral disorders the teacher should receive in-service training in special needs education to enable them to look at patterns that indicate that all is not well with a pupil.

In-service and sandwich refresher courses, workshops and conferences can play a useful role both in keeping teachers up to date with developments and also inspiring a sense of continuing purpose and community among the profession (Reinert, 1986).

Lee (1990) suggests that, a teacher has the responsibility for providing a classroom environment that will encourage children to learn. She must create a happy working atmosphere within her classroom. The teacher should then help each child acquire skills which will enable him or her learn to read, write, use figures and symbols. The child should also be taught to express ideas in lucid and articulate speech. It was therefore important to find out if similar results could be found in these schools.

Lee (1990) further says that, for learning to occur, the teacher should encourage the child’s natural curiosity. He should encourage the child to make use of materials, which he finds in the way, perhaps forging new tools of his own. A teacher must also be flexible, adaptable and willing to keep abreast of new developments in her/his work as well as to improve their own skills (Ndurumo, 1993). The study intended to find out if and to what extent teachers in Rehabilitation Schools attended in-service course programs in special needs education.
2.10 Resource Materials for Children with Emotional and Behavior Disorders

Teaching materials are an important part for programming for children with emotional and behavioral disorders. It is difficult to have a strong educational program without appropriate supportive materials. Reinert (1986) outlines several important aspects of material selection that can be used as a guide in the selection, adaptation, and development of educational materials for use in special classes. Materials should consider behavior problems of the child. They should capitalize on the children’s ability level, interests and/or age level and peer interests. Material should be selected, adapted, or created to meet predetermined objectives. This was as proposed by this study.

Interest to learn should be enticed, created or, magnified by the use of color, game or puzzles contexts, pictures or similar techniques that ensure active involvement. Material can be presented by being condensed, rewritten, or presented through another sensory modality and program to assure retention. To know whether learning has taken place, materials need to have immediate checks to indicate successful performance. Printed materials remain the most commonly used educational tools in school classrooms. This study intended to find out the extent to which printed materials are used in Rehabilitation Schools and if/or they are available. These include; Workbooks, paperback books, newspapers and magazines. Since printed materials are in short supply, teaching aids can be provided as supplements. They include teacher’s manuals, exercise books, test questions, lesson plans, enrichment activities, bulletin board ideas, computer software, audio and video cassettes (Moore, 1998).
Chalkboards are found in practically every classroom. Educators view them as the most useful and versatile teaching tool available to teachers. Real-life objects, models, mock-ups, simulations, games, pictures, drawings and charts can be inexpensive educational aids. They are easily obtained at a low cost and can greatly enhance the learning of complex concepts. This study intended to find out the extent to which resource materials were used and if they were available and adequate for children in Rehabilitation Schools.

2.11 Adapted Resource Materials for Children with Emotional and Behavioral Disorders

Teachers of children with behavioral disorders should adapt standard materials for use with such individual children. The researcher needed to find out if such a situation existed in the Rehabilitation Schools. Reinert, (1986) outlines these adapted materials that are important for teaching these children.

**Punching bag:** Children need to express themselves with inanimate objects. An old "tackling dummy or other soft but durable object can be used for this purpose. The bag should be constructed so as to take abuse without breaking, even when kicked. The bag should remain stationary so that it will not "return" blows dealt by the child.

**Dartboard:** A dartboard can provide a great deal of tension release. The child can put a picture of the teacher, a parent, or another child on the board as a target.

**Soft bats:** Several varieties of soft bats are available for use with children. These provide a safe tool for swinging, throwing, or even striking another person. An angry, aggressive child can express hostility in an acceptable manner with these soft bats, whereas the
withdrawn child is provided with a safe outlet for expression of feelings.

**Tape recorder:** The teacher of children in conflict must rely on a variety of educational techniques for delivery of information. The tape recorder is one of the most useful. It can provide a non-threatening tool for individualizing instruction, self-expression, and reinforcement.

**Materials for therapeutic play:** A variety of materials are needed to develop individual skills. These might include rackets for lawn tennis, paddles and balls, fly rods, basketball goals, hand ball equipment, a place to swim, hike, and fish. Much of this equipment can be rented if ownership is impossible.

**Quiet areas of study:** Children with emotional disturbance often need a quiet area in which to work. This area can provide children with the security they need when they are out-of-sort with the world or with a place relatively free of external stimuli when things become too much for the child to tolerate.

**A Large shatter proof mirror:** Many activities can centre along a mirror; building self-image, getting a realistic view of the image one is presenting to others, and practical activities such as grooming.

**Individual diaries for children:** The keeping of individual diaries by children (if they wish to do so) can be a cathartic activity. Children must be free to say whatever they want to say without fear of a teacher snooping and or/ reprisals. The study intended to find out if such facilities are available.
2.12 Summary of Literature Review

Children who are emotionally disturbed have behavioral disorders, which interfere with their normal education. In the literature reviewed, special education for these children has been stressed in relation to; effective instructional procedures that can be used to teach these learners, Rehabilitation Schools, and the role they play in the education of these learners, the meaning of emotional disturbance and behavior disorders. Finally, a guideline for training the teachers is highlighted. The literature shows gaps to be filled in this study, which include, lack of resources, inadequate training of teachers and the lack of behavior modification strategies to be used for effective learning of these children. Most of the literature reviewed has also been on international perspective; there is lack of adequate literature on the education of children with emotional and behavioral disorders from the Kenyan perspective. There is also need to research on how to trace children to determine on rate of post institutional success and failure. Research on the effectiveness of exit strategies is also necessary particularly if reintegration of children into the society is to succeed. It was in view of these gaps that the present study was designed to find out pedagogical constraints in the learning of children with emotional and behavioral disorders in Central Province, Rehabilitation Schools.
CHAPTER THREE
METHODOLOGY

3.0 Introduction

This chapter describes the methods that were used to find answers to the research questions in chapter one. It explains the design, locale of study, study population, sample and sampling procedures, research instruments, data collection procedures, pre-testing and procedures for data analysis, and the logistical and logical considerations.

3.1 Research Design

The descriptive survey design was adapted in this study. Borg and Gall (1979) describes this design as a distinctive research method and a systematic data collection procedure. It was appropriate in this study because it established the nature of existing situations and analyzed such situations. Best and Khan (1992), rightly points out that, the survey design would enable the researcher to secure evidence concerning existing conditions that could hinder the learning of children with emotional and behavioral disorders.

In this study different variables were considered. The dependent variables were the pedagogical constraints hindering the learning of children with emotional and behavioral disorders. While the independent variables were teacher related variables like instructional strategies and behavior modification strategies. There were also children related variables such as inappropriate behaviors exhibited by the children and environmental related variables such as resources.
3.2 Location of the Study

The study was carried out in all the Rehabilitation Schools in Central province. The Rehabilitation Schools under study were: Kirigiti in Kiambu district for girls, Thika in Thika district, Othaya in Nyeri, and Wamumu Rehabilitation Schools for boys in Kirinyaga. The province was chosen because it houses the only girls Rehabilitation School in Kenya. This helped to reduce gender bias in the study. This reason therefore, formed a basis of selecting central province for this study. Findings cannot therefore be generalized given different conditions in other parts of the country.

3.3 Target Population

The target population of the study was about four hundred and sixty learners (one hundred and eighty girls and two hundred and eighty boys) and fifty-four teachers (thirty-one males and twenty three females) in the four Rehabilitation Schools that cater for children with emotional and behavioral disorders in central province. It was from this population that the sample was drawn.

3.4 Sampling Techniques and Sample Size

3.4.1 Sampling Techniques

The study used all the four Rehabilitation Schools as its sample which comprised Kirigiti, Thika, Othaya, and Wamumu. These schools were all selected since the province had the greatest number of schools and also being near the city of Nairobi it had a great number of cases of children who have been influenced negatively by the city life. In addition the
province has the only Rehabilitation School for girls in the country and this reduced gender bias in the study.

The researcher purposively selected upper primary classes five, six and seven to take part in the study. These classes were purposively selected due to the fact that majority of children with emotional and behavior disorders are referred in these rehabilitation program without even the basic educational background. Children in upper primary classes also had some learning experiences enough to respond to the basics in the questionnaire. From these classes a total of 90 children were randomly selected and used for the study as follows: Kirigiti 45, Thika 15, Othaya 15 and Wamumu 15. Among the 45 children in Kirigiti girls Rehabilitation School, 15 children were randomly selected using the raffle design method from each upper primary class. Among the 15 children in each boys’ Rehabilitation School, 5 were also randomly selected using the raffle design method from each upper primary class.

The study also involved 4 purposively selected Headteachers, one from each Rehabilitation School and 12 Class teachers, 3 from each Rehabilitation School. Class teachers were sampled due to the fact that, apart from subject teachers teaching these classes, they have also had a closer relationship with these children which enabled them to adequately respond to the questions in the questionnaire. The Headteachers were involved in the study because they are in charge of the administrative duties, for example the provision of resources, and discipline among others; and therefore the academic success of the school.

The summary of the sample is explained in the next section.
Table 3.1 The Sampling Grid

<table>
<thead>
<tr>
<th>School</th>
<th>Teachers and Headteachers</th>
<th>Children Male</th>
<th>Children Female</th>
<th>Total Respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kirigiti</td>
<td>4</td>
<td>15</td>
<td>45</td>
<td>49</td>
</tr>
<tr>
<td>Thika</td>
<td>4</td>
<td>15</td>
<td>45</td>
<td>19</td>
</tr>
<tr>
<td>Othaya</td>
<td>4</td>
<td>15</td>
<td>45</td>
<td>19</td>
</tr>
<tr>
<td>Wamumu</td>
<td>4</td>
<td>15</td>
<td>45</td>
<td>19</td>
</tr>
<tr>
<td>Total</td>
<td>16</td>
<td>45</td>
<td>45</td>
<td>106</td>
</tr>
</tbody>
</table>

3.4.2 Sample Size

The sample size comprised a total of 90 children. The 90 children represented (20%) of the target population. It also comprised 4 Headteachers, one in each of the 4 Schools and 12 class teachers which made a total of 16 teachers for the study whose representation was about (25%) of the target population and which are all acceptable representations (Gay, 1992). This made a total of 106 subjects for the study. Table 3.1 summarizes the sampling selection.
3.5 Research Instruments

In order to achieve the objectives of the study, primary data was collected through questionnaires as well as observation schedule as explained below.

3.5.1 Questionnaire

Three different questionnaires were administered to the respondents selected for the study. They were self made by the researcher and were tested and validated during pilot study. These were children’s, teachers’ and the Headteachers questionnaires respectively. Questionnaires are appropriate to studies since they collect information that is not directly observable as they inquire about feelings, motivation and attitudes of individuals. Questionnaires have the added advantages of being less costly and using less time as instruments of data collection (Gall et al 1996). According to Kerlinger (1973) questionnaires elicit information on appropriate area to which the respondents responds objectively. The questionnaires had twelve items each. The questions were closed and open-ended. This gave the respondents more flexibility in answering the question.

The teachers’ questionnaire (Appendix A). The purpose of this instrument was to find out information on issues regarding the teachers’ background, education and level of training, and the strategies they used to teach and modify behavior of these children. It also solicited information regarding problems they experienced when teaching children with emotional and behavioral disorders in Rehabilitation Schools.
The children’s questionnaire (Appendix B) sought to find information regarding their background, reasons for their being admitted to the Rehabilitation School, and their educational aspirations. This would lead to the study finding out the pedagogical constraints in their learning.

The Headteachers’ questionnaire (Appendix C) sought to find information regarding problems experienced in providing learning in these Rehabilitation Schools and what strategies the administration had taken to solve these problems.

3.5 2 Observation Schedule

The purpose of this instrument was to enhance the researcher to record the availability and adequacy of teaching materials, instructional strategies employed in learning, behaviors exhibited by the learners and behavior modification strategies used by the teachers. By using it, Philips (1985) rightly notes that events could be noted as they naturally occur. Data obtained from the observation schedule was used to back up the data from the questionnaire.

3.6 Piloting

The research instruments were pre-tested at Kabete Rehabilitation School in Nairobi, which was not involved in the main study. Piloting involved classes five, six and seven. A total of fifteen children were involved; three teachers from the respective classes and the head teacher of the school. The aim of piloting was to help identify misunderstandings, ambiguities, and unnecessary or inadequate items in the instruments (Wilersma, 1995). It was also used to check the suitability and level of language, and to gain basic
administrative experience in conducting the research in preparation for the large group survey. The procedures used in pre-testing the instruments were identical to those that were used during the actual data collection. Important suggestions, omissions and corrections from the pre-testing exercise were incorporated in the final instruments of data collection. Through the pilot study, the corrected inconsistencies helped to validate the instruments and improve their reliability.

3.6.1 Validity

Validity is the degree to which a test measures what it is supposed to measure (Gay, 1992). The face validity of the research instruments was ensured through expert judgment through which the instruments were assessed in order to determine whether the set of items accurately represented the variables under study. In this process a panel of three lecturers who are well qualified in the area under study was used to determine the validity of items of the questionnaire and observation schedule. Their recommendations were incorporated in the final questionnaires and observation schedule.

3.6.2 Reliability

It is a degree to which a test consistently measures whatever it measures (Gay, 1992). That is, the ability to consistently yield the same results when repeated measurements are taken of the same subjects under the same conditions (Sovell and Lawson, 1970). The split-half technique of assessing reliability of data was employed. This approach required only one testing. The instruments were designed in such a way that there were two parts.
scores from one part were correlated with scores from the second part. This approach was advantageous because it eliminated chance error due to differing test conditions.

In piloting, the children and teachers responded to all the questions. The time taken for observation was between 30 to 40 minutes per class. The teachers helped in clarifying some of the responses to the children, which helped in removing ambiguity, and hence the validity of items was ensured. This was fed into the final instrument. After piloting the results were analyzed and the reliability coefficient was calculated using the Spearman-Brown Prophecy formula, which correlated the two sets of data. The reliability coefficient of 0.85 was felt to be good enough.

3.7 Data Collection Procedure.

After the validity and reliability of the instruments was ascertained, the researcher then visited each of the Rehabilitation Schools under study and familiarized herself with the school. She also sought permission from the Headteachers. The head teacher was briefed on the purpose and objectives of the study. In each Rehabilitation School the researcher provided the questionnaires to the Headteachers and class masters or mistresses who responded by writing appropriate answers. They were collected after one week. Pupils were also provided with their questionnaires and responded to during one lesson in the class. No questionnaires were left with the pupils for collection later. The researcher personally administered the questionnaires with the help of research the subject teachers of
the respective upper primary classes who had been earlier approached oriented with the questionnaire and asked to give their assistance.

At the same time, arrangements were made with the Headteacher for observation of the actual teaching taking place in all the four Rehabilitation Schools. Primary school classes 5, 6 and 7 were each observed separately for 35 minutes daily. One class was observed in the morning, the other mid-morning and another one in the afternoon alternating for a period of one week per school.

3.8 Methods of Data Analysis

The data collected in this study were qualitative and quantitative in nature. The collected data were manually coded to facilitate the entry of data into computer data entry sheets. Descriptive statistics such as percentages, frequencies and means were used to determine the instructional strategies used in teaching, behaviors exhibited by the learners, behavior modification strategies employed by the teachers, resource materials used and their availability and the difficulties encountered by teachers in the classroom.

Qualitative data on the other hand was first converted into a write up using predetermined coding categories that were related to research questions. This process was followed by summarizing the data in order to capture ideas, views and perceptions of teachers and the children in order to derive inferences and draw conclusions. After the data had been analyzed they were presented in form of tables, frequencies, percentages and means. The
findings were then closely evaluated in order to establish the usefulness of the information in answering the research questions of the study.

3.9 Logistical and Ethical Considerations

Before data collection exercise begun, it was important for the researcher to obtain permission from the permanent secretary, Ministry of Education, Science and Technology and also from the Director of Children’s services. Once the permit was given, the researcher on her intention to carry out the study then informed the provincial director of Education and District Children Education Officer to the schools. The researcher also sought permission from the Ministry of Home Affairs (Children’s Department) and the Headteachers of the respective schools under study.
CHAPTER FOUR
DATA PRESENTATION, ANALYSIS AND DISCUSSIONS

4.0 Introduction

This chapter presents data analysis and discussions of the survey carried out in the 4 sampled Rehabilitation Schools in central province. The obtained data was analyzed using descriptive statistics. The analysis is presented in frequency tables and percentages followed by an interpretation. Responses were received from 90 children, 12 teachers and 4 Headteachers and are discussed under 6 major themes derived from the research questions which guided the study, as follows:

1. Bio-data of the respondents.

2. Pedagogical preparation-related constraints of teachers who teach in Rehabilitation Schools.

3. Teaching aids/resources-related constraints for children with emotional and behavioral disorders in Rehabilitation Schools.

4. Constraints related to instructional strategies used by teachers in Rehabilitation Schools.

5. Difficulties teachers encounter when teaching children with emotional and behavioral disorders in Rehabilitation Schools.

6. Constraints related to strategies teachers employ to manage emotional and behavioral problems in the class.
4.1 Bio-data of the Respondents

This section explains Bio-data distribution of the respondents (children, teachers and the Headteachers).

4.1.1 Bio-data of Children by Gender and Class

Out of the 90 children who participated in the study, 45 (50%) were male all from Othaya, Wamumu and Thika School while 45 (50%), were female children from Kirigiti School. Their ages range from 10 years to 17 years. Moreover, 30 (33.3%) of the children were in class five, 30 (33.3%) in class six and 30 (33.3%) in class seven.

Only one Rehabilitation School for girls (Kirigiti) was involved in the study. The other three (Thika, Othaya and Wamumu) were for boys.

4.1.2 Bio-data of Teachers by Gender and Class

Bio-data was collected on distribution of teachers by gender and the class they taught. A total of twelve teachers from the 4 sampled Rehabilitation Schools in central province were involved consisting of 4 males and 8 females. These were teachers teaching classes 5 to 7 (3 from each class). In addition to the teachers, 4 Headteachers consisting 3 females and 1 male participated in the study.

4.2 Pedagogical Preparation-Related Constraints of Teachers in Rehabilitation Schools

The first theme derived from the objectives of the study was to find out if pedagogical preparation of teachers is a constraint in the learning of children in Rehabilitation Schools.
The researcher asked the respondents to indicate in their questionnaire with regard to the following:

1. Academic qualification of teachers and Headteachers in Rehabilitation Schools.
2. The professional qualification of teachers and Headteachers.
3. Teaching experience of teachers in Rehabilitation Schools.
4. Training of teachers in special needs education in Rehabilitation Schools.
5. In-service Training for teachers in Rehabilitation Schools.

4.2.1 Academic Qualification of Teachers and Headteachers in Rehabilitation Schools

Data was collected by the researcher in order to find out whether teachers and Headteachers' academic qualifications were constraints in the learning of children in Rehabilitation Schools. The results are summarized in Table 4.1.

<table>
<thead>
<tr>
<th>Academic Qualifications</th>
<th>Teachers (n=12)</th>
<th>Percent (%)</th>
<th>Headteacher (n=4)</th>
<th>Percent (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>EAACE\KACE\HSC</td>
<td>3</td>
<td>25</td>
<td>2</td>
<td>50</td>
</tr>
<tr>
<td>KCE\EACE\GCE\KCSE</td>
<td>6</td>
<td>50</td>
<td>1</td>
<td>25</td>
</tr>
<tr>
<td>B.ED\B.SC\BA</td>
<td>3</td>
<td>25</td>
<td>1</td>
<td>25</td>
</tr>
<tr>
<td>OTHERS</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Totals</td>
<td>12</td>
<td>100</td>
<td>4</td>
<td>100</td>
</tr>
</tbody>
</table>
Table 4.1 shows that, out of the 12 teachers and the 4 Headteachers sampled, only 3 (25\%) and 1 (25\%) respectively had acquired a university level of education with a Bachelor of Education Degree. Three (25\%) of the 12 teachers and 1 (25\%) of the 4 Headteachers had KACE\ EACE\ HSC, while 6 (50\%) of the 12 teachers and 2 (50\%) of the 4 Headteachers had KCE\ EACE\ KCSE as their highest academic qualification.

This is an indication that, majority (75\%) of teachers in the Rehabilitation Schools were form 4 leavers. Such staffing of teachers in Rehabilitation Schools meant that a large percentage of teachers have a minimum level of education which has not prepared them well enough to teach children with emotional and behavioral disorders. This could therefore be a pedagogical constraint in the learning of children in Rehabilitation Schools. As observed by Molloy (1972), teachers academic qualifications affect the quality of teaching and subsequently the learning of children.

Closely related to academic qualification was professional preparation of teachers as presented, analyzed and discussed below.

4.2.2 Professional Preparation of Teachers and Headteachers in Rehabilitation Schools

In order to find out whether teachers’ professional qualifications was a constraint in the learning of children in Rehabilitation Schools, data was collected on whether teachers and Headteachers had received any professional training. The results are presented in Table 4.2. below.
Table 4.2: Teachers and Headteachers’ Professional qualification.

<table>
<thead>
<tr>
<th>Professional Qualification</th>
<th>Teachers (n=12)</th>
<th>Percentage (%)</th>
<th>Headteachers (n=4)</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>P4</td>
<td>1</td>
<td>8.3</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>P3</td>
<td>1</td>
<td>8.3</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>P2</td>
<td>2</td>
<td>16.7</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>P1</td>
<td>3</td>
<td>25</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>SI</td>
<td>2</td>
<td>16.7</td>
<td>2</td>
<td>50</td>
</tr>
<tr>
<td>B.ED</td>
<td>1</td>
<td>8.2</td>
<td>2</td>
<td>50</td>
</tr>
<tr>
<td>Untrained form fours</td>
<td>2</td>
<td>16.7</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

Table 4.2 shows that, the sampled teachers were all qualified at different levels. Out of the 12 teachers, 1 (8.3%) was a P4 teacher, 1 (8.3%) was a P3, 3 (25%) were P1, 2 (12.2) SI and 1 (8.3%) had a Bachelor’s degree. Out of the 4 headteachers, 2 (50%) had a diploma in education, while the other 2 (50%) were trained graduates. However, there was a group of untrained teachers. For example out of the 12 teachers, 2 (16.7 %) were untrained form 4 leavers while 3 (25 %) had only a certificate in education. The inference here is that, these teachers were not qualified enough to teach children in Rehabilitation Schools. Presence of teachers who are not professionally trained and also some who do not have enough professional training could be a constraint in the learning of children in Rehabilitation Schools. As Molloy (1972) said, teachers of children with emotional and behavioral disorders should be professionally trained and certified. He further pointed out
that, professional preparation of teachers influence the learning of children. The Headteachers were found to be all professionally trained therefore their training was not a constraint in the learning of these children in Rehabilitation Schools.

A further investigation by the researcher after classroom observation as to the reason why P1 and untrained form four teachers were teaching in the Rehabilitation Schools revealed that, some of these teachers were not employed by the TSC but they were volunteer workers teaching specialized subjects for example, Mathematics, English, and GHC among others in Rehabilitation Schools. These teachers are therefore not conversant with instructional strategies for children with special needs, which could therefore be a constraint in the learning of children in Rehabilitation Schools.

4.2.3 Teachers and Headteachers Teaching Experience in Rehabilitation Schools

The researcher was interested in finding out if teachers and the Headteachers teaching experience was a constraint in the learning of children in Rehabilitation Schools.

The results are presented in Table 4.3 below.
Table 4.3 shows that, teaching experiences of the teachers sampled varied a great deal. Out of the 12 teachers, 6 (50 %) had experience ranging from less than 1 year to 3 years while 2 (16.7 %) had between 7 to 10 years and 3 (33.3 %) had experience of 4 to 6 years. Out of the 4 Headteachers in the 4 surveyed Rehabilitation Schools, 3 (75 %) had been heads for between 7 to 10 years and only one 1 (25 %) had been head for over 10 years. Further discussion with the respondents revealed, that the high turn over of teachers was due to the fact that some teachers leave the profession due to reasons such as being volunteer workers and/or being transferred from one centre to another because of shortage of teachers in some centres. Others were dissatisfied with their profession of teaching children with special needs and therefore gave up, and new teachers were posted. Presence of teachers with little experience could be a constraint in the learning of children as they need time to know the rate at which to teach these children with special needs in Rehabilitation Schools. Children on the other hand need time to adjust to the new life in the Rehabilitation Schools and the new teachers’ teaching methods.
4.2.4 Training of Teachers and Headteachers of Rehabilitation Schools in Special Needs Education

The researcher needed to find out if teachers and Headteachers in Rehabilitation Schools had received any training in special needs education. The results are presented in Table 4.4 below.

Table 4.4: Training of Teachers and Headteachers in Special Needs Education

<table>
<thead>
<tr>
<th>Special Training</th>
<th>Teachers (n=12)</th>
<th>Percentage (%)</th>
<th>Headteachers (n=4)</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specially Trained</td>
<td>3</td>
<td>22.2</td>
<td>1</td>
<td>8.2</td>
</tr>
<tr>
<td>Not Specially Trained</td>
<td>9</td>
<td>77.8</td>
<td>3</td>
<td>90.8</td>
</tr>
<tr>
<td>Total</td>
<td>12</td>
<td>100</td>
<td>4</td>
<td>100</td>
</tr>
</tbody>
</table>

Table 4.4 shows that, 9 (77.8%) out of the 12 teachers and 3 (90.8%) out of the 4 Headteachers, were not trained in special needs education and 3 (22.2%) teachers and 1 (8.2%) Headteacher were trained. This implied, that since a large number of teachers and Headteachers were not trained in special needs education, they are not conversant with instructional strategies for children with special needs and therefore this could be a constraint in the learning of children in Rehabilitation Schools. This contradicts Molloy’s (1972) assertion that, teachers of children with emotional and behavioral disorders should not only be professionally trained, but their training ought to cover the following areas: Special education, elementary education, child Psychology, sociology, guidance and counseling and practicum. He further pointed out that, these qualifications inculcates in the
teachers knowledge and relevant skills in handling and teaching children with special needs and therefore very essential for teachers’ effectiveness and the children’s learning and developing and planning IEPs

4.2.5 In-service Training of Teachers in Rehabilitation Schools

In order to obtain the needed data on in-service training, teachers were asked to indicate whether they had attended an in-service course. The results are presented in Table 4.5 below.

Table 4.5: In-Service Course Attendance by Class Teachers

<table>
<thead>
<tr>
<th>Frequency of Attendance</th>
<th>Number (n=12)</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not attended any course</td>
<td>9</td>
<td>70</td>
</tr>
<tr>
<td>Attended between 1-2 times</td>
<td>2</td>
<td>16.7</td>
</tr>
<tr>
<td>Attended over 3 times</td>
<td>1</td>
<td>8.3</td>
</tr>
<tr>
<td>Totals</td>
<td>12</td>
<td>100</td>
</tr>
</tbody>
</table>

Table 4.5 shows that, out of the 12 Class teachers 9 (70 %) never attended any in service course on children with emotional and behavioral disorders as compared to a small number (2) who had attended it between 1 to 2 times and an even smaller number (1) who had attended it more than 3 times. This meant that, since a high number (9) of the Class 12 teachers sampled taught without necessarily attending an in service course, it could therefore be a constraint in the learning of children with emotional and behavioral disorders in Rehabilitation Schools. This finding is contradictory to the emphasis Galloway
et al (1982) placed on in-service training. They said that, in identifying and teaching children with emotional and behavioral disorders the teacher should receive in-service training in special needs education to enable him/her to teach and also look at patterns that indicate that all is not well with a child. Even though MOEST (2001) claimed that, in-service training was designed by the government of Kenya in order to equip teachers in the field with the latest methods of teaching since in-service courses are instrumental to the success of teachers in the teaching profession, majority of the teachers studied have not benefited from such initiative.

4.3 Teaching Aids/ Resources-related constraints.

Apart from pedagogical preparation of teachers mentioned above, teaching aids/resources are important to any teacher for effective teaching, more so for children with emotional and behavioral disorders. Findings pertaining to adequacy and use of the above mentioned was based on the questionnaire directed to the teachers and also from the observation schedule. The questions focused on whether there were constraints related to the:

(1) Adequacy of teaching aids/resources.

(2) Use and appropriateness of the teaching aids/resources.

(3) Use of teaching aids/resources by teachers during classroom instruction.

(4) Use of adapted teaching resources by teachers.
4.3.1 Adequacy of Teaching Aids/Resources

With regard to adequacy of teaching aids/resources, teachers were asked to indicate the adequacy of text books, maps, charts drawings and so on in the subjects they were teaching.

Table 4.6: Adequacy of Teaching Aids/ Resources

<table>
<thead>
<tr>
<th>Adequacy of Teaching Aids / Resources</th>
<th>Number (n=12)</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adequate</td>
<td>2</td>
<td>16.7</td>
</tr>
<tr>
<td>Inadequate</td>
<td>10</td>
<td>83.3</td>
</tr>
<tr>
<td>Totals</td>
<td>12</td>
<td>100</td>
</tr>
</tbody>
</table>

The data in Table 4.6 shows that, out of the 12 Class teachers, 10 (83.3 %) indicated the inadequacy of teaching aids/resources while a comparatively smaller number (2) indicated their adequacy. This lack of adequate teaching aids/resources could be a constraint in the effective learning of children in Rehabilitation Schools. This view was emphasized by Reinert (1986) when he said that, teaching aids/resources are important for teaching these children. He also said that, it is difficult to have a strong education program without adequate and appropriate supportive resources, and that, aids/resources helped in making subjects less abstract for these easily discouraged children and therefore enhance their learning.
4.3.2. Use of Teaching Aids/Resources by Teachers in Rehabilitation Schools

The teachers were asked to indicate whether they used the available teaching aids/resources while teaching. The question was based on the assumption that the adequacy and use of aids/resources affected teaching and subsequently, children’s learning.

Out of the 12 Class teachers 8 (66.7%) always used the available teaching aids/resources, as compared to a small number (3) who used them rarely, and an even smaller number (1) who never used them. Lack of and infrequent usage of teaching aids/resources by some teachers could be a pedagogical constraint in the learning of children in Rehabilitation Schools.

4.3.3 Use of Teaching Aids/Resources by Teachers During Classroom Instruction.

To find out more on use of the aids/resources, the researcher made sure she observed teachers’ use of these aids/resources during classroom instruction. From the observation, the researcher noted which teaching aids/resources were used in teaching. Drawings and chalkboard were mostly used by teachers. They were followed by charts, while models and pictures took the third priority, however, real objects were the least in use. Slides and projectors were not used at all by any of the teachers’ in the sampled Rehabilitation Schools.

Observation by the researcher also showed that, even when teachers made use of these available resources, they were not appropriately used. For example, most teachers made use of the chalkboard but they obstructed the children from seeing what they had written, while other teachers did not maximally use the drawings, pictures and objects to enhance
important aspects in their teaching. Some did not even indicate the resources they used against every topic in the schemes of work. Inappropriate usage of aids/resources by the teachers could be interpreted as one of the constraints in the learning of children with emotional and behavioral disorders in Rehabilitation Schools.

4.3.4 Use of Adapted Teaching Resources by Class Teachers in Rehabilitation Schools.

Class teachers were asked if they used adapted resources while teaching in Rehabilitation Schools under study. The results are presented in Table 4.7 below.

Table 4.7: Teachers Use of Adapted Teaching Resources

<table>
<thead>
<tr>
<th>Use of Adapted teaching resources</th>
<th>Frequency (n=12)</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Used them always</td>
<td>1</td>
<td>8.3</td>
</tr>
<tr>
<td>Used them rarely</td>
<td>2</td>
<td>16.7</td>
</tr>
<tr>
<td>Never used them</td>
<td>9</td>
<td>75</td>
</tr>
<tr>
<td>Totals</td>
<td>12</td>
<td>100</td>
</tr>
</tbody>
</table>

Table 4.7 shows that, out of the 12 Class teachers 9 (75 %) never used adapted teaching resources as compared to 2 (16.7 %) who used them rarely and 1 (8.3 %) who used them always. This meant that, lack of use of adapted resources by a large number of Class teachers could be a pedagogical constraint in the learning of children with emotional and
behavioral disorders in Rehabilitation Schools. Reinert (1986) said that, adapted teaching resources are important in the learning of children with special needs especially in explaining abstract concepts. These includes equipment and facilities adapted to suit individual learner’s needs for example soft bats, individual diaries for children, a large shatter proof mirror to build self image, practical activities such as grooming use of visual aids computer among others as was discussed in literature reviewed. He also pointed out that, adoption minimizes failure, enhances ego, strengthens and maximizes effective learning. Therefore the lack of use of adapted resources by a large number of teachers in Rehabilitation Schools studied could result in outcomes contradictory to those stated above.

Though resources are important for teaching these children, instructional strategies used are also important and therefore analyzed as another objective as is discussed next.

4.4. Constraints Related to Instructional Strategies Employed in Teaching by Class Teachers and Headteachers in Rehabilitation Schools

To ascertain whether there were constraints in learning as a result of instructional strategies used by teachers in Rehabilitation Schools, data was collected with regard to the following:

1. Instructional strategies employed by teachers.
2. Instructional strategies employed by the Headteachers.
3. What influenced teachers use of instructional strategy.
4.4.1 Instructional Strategies Employed by Class Teachers in Rehabilitation Schools.

With regard to instructional strategies used by class teachers, data was collected and the teachers’ and children’s responses were explained. The most commonly used strategy in teaching was lecture as indicated by the teachers and also by the children followed by class discussion. Question and answer strategy closely followed the above mentioned. Practical demonstration and group teaching took the fourth position. Individualized attention strategy was the least used as indicated by the teachers. However, the children did not indicate the use of individualized attention by their Class teachers. This showed a low level of commitment by teachers to the use of a variety of instructional strategies in teaching, especially, those that are appropriate for children with special needs. For example, out of the 12 teachers, 2 used group teaching and another 2 used demonstration, while 1 used individualized attention. This could be a pedagogical constraint in the learning of children in Rehabilitation Schools. This finding is not in line with Otiato’s and Kathenya’s (1994) assertion. They pointed out that, for children with emotional and behavioral disorders who perceive education to be hard, a variety of instructional strategies should be used in their learning.

4.4.2 Instructional strategies used by Headteachers in Rehabilitation Schools.

To back up the class teachers’ information on the use of instructional strategies in Rehabilitation Schools, data was collected on the instructional strategies used by the Headteachers. This is because apart from managing the institutions they also taught specialized subjects. Two (2) of the Headteachers sampled used combination of lecture and
discussion. One (1) used lecture and the remaining one used a combination of lecture and group teaching as instructional modes.

This further confirmed the results in regard to class teachers’ use of instructional strategy in that, appropriate instructional strategies were not employed in teaching children in Rehabilitation Schools sampled. This was a pedagogical constraint in the learning of these children. The implication is that, the class teachers and Headteachers chose the common conventional skills that they are familiar with. Further discussions with the respondents after observation in class revealed that, they choose these strategies because they are convenient and less time-consuming. Not employing other instructional strategies might be an indication of lack of awareness of these instructional strategies.

4.4.3 What Influenced Class Teachers’ use of Instructional Strategies in Rehabilitation Schools.

Data was collected in order to find out what influenced class teachers’ choice of instructional strategy, and to find out whether it was a constraint in their teaching and subsequently the learning of children in Rehabilitation Schools. Class size was the first consideration followed closely by lack of facilities, materials, text books and class discipline, while teaching load was the least consideration. Linked to instructional strategies used in teaching in Rehabilitation Schools was strategies employed to manage behavioral problems of these children so as to learn. They are presented and analyzed below.
4.5. Constraints related to Strategies Employed by Class Teachers and Headteachers to Manage Behavioral Problems of Children in class.

Children with emotional disturbances exhibit behavioral disorders that could affect their learning. However, there are strategies teachers could employ to manage these behavioral disorders in class so that the children can learn. Data was therefore collected in regard to the following.

1. Strategies employed by teachers and Headteachers to manage behavioral problems of children in class.

2. Children feelings about being placed in Rehabilitation Schools.

4.5.1 Strategies Employed to Manage Behavioral Problems of Children in Class

Data was collected in regard to strategies employed by teachers and the Headteachers to manage behavioral problems of children in class in the Rehabilitation Schools sampled. Of all the strategies employed by teachers to manage behavioral problems of children in class, caning was the most popular and calling children by name took second place. Rewarding and scolding followed the above mentioned while time out and good behavior games were fourth in place. Among the 4 Headteachers, caning was the most popular, followed by scolding. Rewarding, calling children by name took the third position while time out was the least in use. However, good behavior games was not used by any of the Headteachers.

From the children’s responses, caning also seemed the most popular followed by scolding, rewarding and calling children by name were third in place. Time out and good behavior games were the least in use. None of the respondents indicated the use of medication.
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From the children’s responses, caning also seemed the most popular followed by scolding, rewarding and calling children by name were third in place. Time out and good behavior games were the least in use. None of the respondents indicated the use of medication.
Other better behavior modification strategies like good behavior games, time out and rewarding were not frequently used. This is a constraint in the learning of these children because it reveals a very limited use of behavior modification strategies by teachers that hold much promise for desirable change in behavior, like time out, good behavior games, guidance and counseling.

4.5.2 Children’s Feelings about being Placed in Rehabilitation Schools.

Closely linked to behavior modification strategies used by teachers in Rehabilitation Schools were children’s feelings about being placed in these centres.

Out of the 90 children surveyed, 72 (81.8%) revealed that they do not find it appropriate to be placed in Rehabilitation Schools while 16(18.2 %) felt it was appropriate to be placed in these Schools. This meant that negative feelings by a large percentage (81.8%) of these children could be a constraint in their learning. This finding could be viewed in the light of Ndunda’s (1978) observation that, these institutions were established to resocialise young offenders, build their self esteem and fit them back in to society after they have reformed, but they turned out to be prisons for young offenders.

4.6 Difficulties Teachers Encounter when Teaching Children in Rehabilitation Schools.

Children with emotional and behavioral disorders are in conflict with their environment. They could be having a relationship problem with their teacher, peer, in conflict with themselves or they may be victims of uncontrollable circumstances in their homes.
These conditions cause them to exhibit behavioral problems that interfere with their learning. The researcher needed to find out behavioral and general constraints teachers faced while teaching children in the Rehabilitation Schools sampled. Data was therefore collected in regard to the following:

1. Reasons for children being in Rehabilitation Schools.
2. Educational aspiration of the children.
4. General constraints teachers faced in Rehabilitation Schools.
5. Teachers’ suggestions for solutions to these constraints.
6. General constraints faced by Headteachers and suggested solutions.

4.6.1 Reasons for Children Being in Rehabilitation Schools.

Data was collected by the researcher in regard to the reasons why these children were in Rehabilitation Schools in order to find out if these reasons constitute constraints in teachers’ delivery of instruction.

Out of the 90 children sampled, 57 (63.3%) are in these schools for the purpose of discipline and protection (children who committed offences like stealing, destroying property, rape and so on), while the remaining 33 (36.7%) are there for care and protection (children who were neglected, abandoned, orphans, street children and so on). These Special needs like behavioral disorders interfered with the teachers’ effectiveness in teaching and this was a pedagogical constraint in the learning of these children in Rehabilitation Schools. This finding agreed, with Kirk and Gallagher’s (1983) assertion...
that, children with emotional and behavioral disorders have problems that could interfere with their learning. Kauffman (1981) also said that, emotional disturbance in children has been recognized as a problem in special education.

Though these children are in these centres due to different reasons as earlier indicated, the researcher observed that, children in need of discipline and protection learn together with those in need of care and protection. This provides the former with an opportunity to influence the latter negatively. Negative peer influence is therefore a constraint in the learning of children in Rehabilitation Schools.

4.6.2 Educational Aspiration of the Children

To find out more on difficulties teachers experienced in teaching these children, data was collected in regard to how far a child would hope to go on in his/her education.

Results are presented in Table 4.8.

Table 4.8: Educational Aspiration of the Children.

<table>
<thead>
<tr>
<th>Educational aspiration of the children</th>
<th>Frequency</th>
<th>Percentage</th>
<th>Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enroll for a degree</td>
<td>3</td>
<td>3.3</td>
<td>4</td>
</tr>
<tr>
<td>Proceed to Diploma</td>
<td>24</td>
<td>26.7</td>
<td>3</td>
</tr>
<tr>
<td>Proceed to Form 4</td>
<td>26</td>
<td>28.9</td>
<td>2</td>
</tr>
<tr>
<td>Stop at Standard 8</td>
<td>37</td>
<td>41.1</td>
<td>1</td>
</tr>
</tbody>
</table>

Table 4.8 shows that, out of the 90 children in the surveyed Rehabilitation Schools, only 3 (3.3%) hoped to enroll for a degree at a University level, while 24 (26.7%) aspired to
Diploma level, 26 (28.9%) to go up to form four and 37 (41.1%) expect to stop at class 8. This showed that majority of these children do not want to proceed with their education beyond class (8) as compared to a small number (3) who want to attain a degree in Education. The desire not to proceed with their education could be interpreted as one of the constraints in their learning. This supported the opinion of Gallowey, Bloofield, and Ball (1982) that, for these children with emotional and behavioral disorders, education has a low priority. The path towards academic success is difficult and uncertain. They also have a limited understanding of what school is trying to do based on their own social and personal problems that distract them from academic work. They are therefore not geared towards education achievement.

Further discussions with the respondents revealed that, majority want to get out of the Rehabilitation Schools after their court orders’ are revoked to go out in the world to get any jobs so as to earn money and be free since they feel they are in confinement and under punishment for offences committed.

4.6.3 Behavioral Constraints Teachers Faced In Rehabilitation Schools.

Teachers were asked to indicate the behavioral constraints faced in handling the children in Rehabilitation Schools. Findings reveal that, the main activities found to cause teachers problems when teaching in the Rehabilitation Schools sampled were, Stealing/smoking followed by running away. Making noise in class was third in occurrence, while abusing and fighting fellow children and lying, crying, sleeping in class followed closely. These
behavioral problems are a constraint in the learning of these children in Rehabilitation Schools. This highlighted Kirk and Gallagher’s (1983) contention that children who are emotionally disturbed have problems that could lead to delinquent behavior, including aggression, destructiveness and crime. These characteristics were also observed by the researcher during classroom instruction.

4.6.4 General Constraints Teachers Face in Rehabilitation Schools

Teachers were further asked to state the general constraints they faced in Rehabilitation Schools. They were allowed to give more than one response. The responses were computed on the number of times each constraint was mentioned.

From the findings it is apparent that inappropriate behavior exhibited by the children was mentioned as the greatest constraint. Classroom observation by the researcher during instruction confirmed this. Some children acted out, yelling, crying among others. For the teachers who had received no form of training as observed by the researcher, they encountered more problems for example, they lacked control of their class. They were also unable to adapt equipment and facilities to suit the learners.

Insufficient resources ranked second. For example, lack of class text books was mentioned by the teachers as a major constraint. Further observation by the researcher confirmed the scarcity of the resources especially the adapted resources. This proved to be a challenge to effective teaching and therefore a constraint in the learning of children in Rehabilitation Schools.
The teachers felt that the nature of the learners they handled made them do extra work, for which they were not adequately renumerated. They felt that inadequate motivation in terms of salary or allowances was a constraint in their effectiveness.

Furthermore, heavy workload which was the last to be mentioned was a factor that negatively affected teachers' effectiveness in teaching in Rehabilitation Schools. In addition, the teachers revealed that they were usually emotionally tired even before the end of the day due to the fact that they had to cope with the children's behavioral disorders. The researcher also observed that some of the teachers taught all the subjects in their class alone while others even tried to combine classes and this limited their effectiveness in teaching these children.

4.6.5: Teachers Suggestions for Solutions to their Constraints

The last item in the questionnaire required each teacher to give suggestion on how to solve these constraints. Table 4.9 gives a summary of the finding.
Table 4.9. Teachers Suggestion on Reducing Constraints

<table>
<thead>
<tr>
<th>Problem</th>
<th>Suggested solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inappropriate behavior exhibited by children</td>
<td>- Coordinated guidance and counseling by all teachers.</td>
</tr>
</tbody>
</table>
| Lack of facilities                     | - Teachers to improvise resources  
                                           - Government and NGOS to supply required facilities                                                                                               |
| Lack of motivation                     | - Teachers to motivate children.  
                                           The Government to provide a good remuneration package for teachers,  
                                           -Promote teachers and pay them an extra package as is done in other categories of disabilities.  
                                           -Teachers in the field to be in serviced.                                                                                                           |
| Overworking                            | - Employment of more trained teachers in special needs education by the T.S.C. The children’s department to ask for qualified teachers from the TSC.  
                                           - Cases which are not very serious be taken to regular schools.                                                                                     |

The teachers gave their opinion on the best ways to tackle the identified problems.

4.6.6 General constraints faced by Headteachers in Rehabilitation Schools and Suggested Solutions

The Headteachers were also asked to list constraints in the learning of children in Rehabilitation Schools. They were also requested to suggest solutions to the identified
constraints. The information was used to corroborate the teachers’ responses. The results are presented in Table 4.10 below.

Table 4.10: Constraints and Suggested solutions as Perceived by HeadTeachers

<table>
<thead>
<tr>
<th>Constraints</th>
<th>Suggested Solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inappropriate behaviors by children</td>
<td>Provide guidance and counseling</td>
</tr>
<tr>
<td>Resources</td>
<td>Government to increase funding for schools</td>
</tr>
<tr>
<td>Heavy workloads</td>
<td>Less severe cases to be taken to regular schools</td>
</tr>
</tbody>
</table>

From the results in able 4.10, it is apparent that all the Headteachers indicated inappropriate behaviors, lack of resources and heavy workload as the main constraints in the learning of children in Rehabilitation Schools. From the suggested solutions they gave for each constraint the researcher found them to corroborate teachers’ suggestions.

Finally teachers and Headteachers were asked to give their recommendations and these are discussed below.
4.7. Teachers Recommendations to the Government on How to Improve Learning in Rehabilitation Schools.

Opinion from the teachers in these Schools were:

a. The Government should give training in special needs education to all trainee teachers in teacher training colleges and universities.

b. The government should employ more teachers who are qualified to handle children with special needs in Rehabilitation Schools.

c. The Government should provide enough facilities to the Rehabilitation Schools to enhance the learning of these children.

d. Children with very bad behavior to be separated from those who are better behaved in Rehabilitation Schools. For example those in need of discipline and protection to have their own centres, while those in need of care and protection should be provided separate centres. This will minimize negative peer influence.

e. Teachers in these centres should be given higher salaries and the 10% allowance benefit for all special needs education teachers teaching in special schools to be added to about 35%. Those who have been trained and not yet deployed to special schools but are in regular schools should be posted by the TSC to the special schools and also receive 35% special allowance.

f. Every Rehabilitation School should have a guidance and counseling department. This department should be manned by well-trained personnel in the area of special needs education.
4.7.1: Headteachers Recommendations to the Government.

The Headteachers had the following recommendations for the Government to address their constraints in Rehabilitation Schools.

1. The Government should improve bursary funds to cater for fees and facilities in Rehabilitation Schools.

2. Provide guidance and counseling personnel for the children in Rehabilitation Schools.

3. Children without more serious cases should be taken to regular Schools to study with others and be under supervision of trained field and social workers.

4. Teachers in Rehabilitation Schools should be taken for in-service courses and seminars on teaching and guidance and counseling of these children with special needs.

5. The Government should increase funding for these special Schools to meet the cost of learning resources, personal grooming, loans for placement after leaving the program since some those under care and protection have no parents or guardians to cater for their needs when in the program and after the program.

4.7.2: Observations made during classroom Instruction

During the study an observation of the teachers was made directly in addition to administration of questionnaires. It was noted that;

1. The teachers did not have schemes of work or lesson plan. Further more the untrained teachers did not even know how to make them. Those who had
knowledge of making them simply ignored their use in teaching. There was also no use of IEPs in delivery of instruction an important component in special needs education.

2. Teachers did not also use appropriate behavior modification strategies in the class for example, guidance and counseling, time out, good behavior games among others which are important in bringing out desirable behavior change and are an important aspect in dealing with children with special needs in and out of the classroom.

3. Teachers did not always indicate materials against every topic taught. This confirmed further that they did not use appropriate methods of instruction. However they used general available materials like Maps Chalkboard, objects and pictures to give notes and visual illustration. However the teachers do not appropriately and adequately utilize these resources therefore constituting a constraint in their effectiveness.

4. Lesson observation also revealed that teachers dominated teaching. For example, while teaching, the teacher did not individually organize the class but instead used a whole class teaching method where he/she just sat/stood in front of the class. When teaching, preferably by lectures, the teachers talked to the chalkboard and obstructed the children in most cases. This resulted in children sleeping in class. The actual instructional strategies observed during the lessons were much less than those indicated by the respondents in the questionnaire. Only two instructional strategies were observed namely discussion and lecture.
This was an indication that teachers’ responses reflected what they thought ought to happen and not necessarily what they practiced. However covering the syllabus without paying attention to the process of acquisition of values especially by children in Rehabilitation Schools seems to be a waste of time and a constraint in the learning of these children.

5. The children exhibited inappropriate behaviors that interfered with their learning in class. For example moving around the class unnecessarily, shouting, yelling, sleeping, rudeness to authority, and acting out among others. These behavioral disorders interfered with the teachers’ delivery of instruction and class management and was a constraint in the learning of the children.
CHAPTER FIVE

SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

5.0. Introduction

This chapter summarizes the findings of this study. The summary is divided in parts so that something is mentioned about each of the objectives, which the researcher aimed at achieving. The summary is followed by conclusions based on the study findings also made in connection with the objectives of the study. After the summary and conclusions, an attempt is made to suggest some recommendations on handling or solving pedagogical constraints in the learning of children with emotional and behavioral disorders in Rehabilitation Schools. Finally recommendations of areas of further research are made.

5.1 Summary of Research Findings

The study intended to find out pedagogical constraints in the learning of children with emotional and behavioral disorders in Rehabilitation Schools.

In this section, a summary of the results of the study are presented in accordance with the objectives of the study which were to:

(1) Find out pedagogical preparation of teachers who teach in Rehabilitation Schools.

(2) Find out the adequacy and appropriateness of the teaching resources for children with emotional and behavioral disorders.

(3) Examine the instructional strategies used in teaching children with emotional and behavioral disorders.

(4) Investigate difficulties teachers encounter when teaching children with emotional
and behavioral disorders.

(5) Find out the strategies teachers employ to manage emotional and behavioral problems in the classroom.

On the basis of the above areas, the study found that:

From the findings it was also clear that, majority of teachers in Rehabilitation Schools were neither trained in Special needs education nor attended in-service course program. This greatly interfered with their effectiveness in delivering instructions.

The findings also revealed that some teachers in the Rehabilitation Schools lacked adequate professional qualification since some were form four leavers who had not received any professional training as teachers in any teacher training college. Useful work with these children depends largely on the expertise of the teacher. Therefore, teachers should be professionally trained and certified. While in training the basic courses for the teachers ought to cover these areas: special education, elementary education, child psychology, sociology, guidance and counseling, and Practicum (Molloy, 1972), for better use of behavior modification strategies aimed at bringing desirable change in the behavior of these children.

Teachers did not maximally use appropriate instructional strategies for children with special needs. For example...
of imparting learning and bringing out good behavior in these children with special needs, group teaching and demonstration among others.

Lecture and discussion strategies appeared to be overused. Due to the heavy workload and shortage of teachers, they found the methods appropriate for faster completion of the syllabus. This can also be further attributed to teachers' lack of training in the necessary courses needed in handling children with special needs as mentioned earlier.

Results also showed that, there is a general lack of important learning resources eg in all Rehabilitation Schools. There are no facilities to even allow for demonstration of important aspects of special education.

The schools do not also have adapted resource materials like tape recorders, slides, puppets and materials for therapeutic play among others. From the researcher's observation it was clear that, reference materials in special education such as books are limited in all Rehabilitation Schools sampled. The available ones were found to be inappropriate, they were mainly K.I.E publications and were criticized by teachers as being shallow. Teachers during classroom instruction, did not adequately and appropriately use the few resources that are there.

The findings also revealed that teachers face difficulties in teaching children in Rehabilitation Schools. Children succumb to peer influence which is reflected in the
activities they do. These activities include running away from the Rehabilitation Schools, acting out, and yelling, crying in class, rudeness to authority among others.

The findings showed that, most teachers in Rehabilitation Schools did not use proper methods of behavior modification with the children like IEPs, guidance and counseling among others. For example caning and scolding was very popular among the teachers and the Headteachers. This further affected the children's feelings about being placed in the Rehabilitation Schools. A large percentage indicated they did not find it appropriate to be there. They did not also want to proceed with their education beyond class 8 and form 4 as majority of them indicated. When asked the reasons for their negative feelings about being in the program, the respondents revealed that, majority want to get out of the Rehabilitation Schools after their court orders' are revoked to go out in the world to get any jobs so as to earn money and be free since they feel they are in confinement and under punishment for offences committed.

Teachers are facing other problems that the researcher has categorized as direct problems. They include; inappropriate behaviors by the children, overworking, lack of motivation and lack of resources. If teachers are paid well, have adequate facilities and have less work load their morale will be boosted and therefore improve the learning of these children. There is also need for the Teachers Service Commission to employ special education graduate teachers in Rehabilitation Schools.
5.2. Conclusion

From the foregoing findings of the study, the following pedagogical constraints were identified:

That there is failure by a large percentage of teachers to use proper instructional strategies relevant in teaching children with special needs.

There is also lack of pedagogical preparation of teachers in Rehabilitation Schools. Majority of teachers lacked the right professional training in education for example Bachelor of Education Degree. Rehabilitation Schools also had teachers who had received no training at all. For example untrained form 4 leavers were working as volunteer workers and teaching these children. There is also no provision for in-service training for teachers.

Insufficient resources, especially the adapted resources for teaching these children were also a problem, Proper and maximum use of the few available resources was insufficient.

Teachers experienced problems like inappropriate behaviors exhibited by the children, and peer pressure that interfered with their learning. There was also failure by teachers to employ better behavior modification strategies. Instead they over relied on corporal punishment and scolding which made the children feel it is not appropriate to be placed in the Rehabilitation Schools. This amounting to an hindrance in the learning of children in Rehabilitation schools. Unless these pedagogical constraints are addressed by the government and the school administration and other stakeholders concerned with the education of these children, their learning in Rehabilitation Schools will continue to be affected. In view of this, various recommendations are made as is discussed in the next section.
5.3 Recommendations

Based on the findings above, it is recommended that:

1. The Ministry of Education Science and Technology should ensure that all teachers are in-serviced. The in-service training should be in special needs education to enable them teach children with special needs for example, children with emotional and behavioral disorders. For this to be effective the Government should therefore develop a special education department in all teacher-training colleges in the various areas of special education.

2. The above will only be possible if the Government speeds up the implementation of the policy on special education, which has already been made by the Ministry, Kenyatta University in link with Cambridge University and the special schools. The policy can then be used as a guide to all activities in special education including training, deploying and the in-service training of both regular and specialist teachers in all special Schools.

3. The Teachers Service Commission should deploy more trained teachers to the Rehabilitation Schools so as to ease the problem of teacher shortage. Teachers already in the field should be taken for in service course programs and seminars on special needs education, which will update them on the new approaches to teaching methods.

4. Teacher educators, inspectors of schools and other stake holders in teacher education should emphasize to teachers of children with emotional and behavioral disorders the need to employ appropriate methods in teaching. For example learner-centered teaching
strategies (such as group discussions, individualized attention) as opposed to teacher centered approaches (such as lecture and discussion) which teachers find more appropriate for faster completion of syllabus.

5. There is need for schools to stock their libraries with a variety of learning resources other than textbooks. For example adapted learning resources like audio-visual aids to improve the learning. These necessary materials and equipment should be made available to teachers in abundance. Kenya Institute of Education should therefore produce more resources relevant to the teaching of children with special needs. This will help teachers to plan well and orderly in their teaching. Teachers should also improvise aids/resources.

6. The Government should Provide a guidance and counseling program in Rehabilitation Schools. The personnel in the guidance and counseling department should be B.ED graduates or diploma graduates who have knowledge of different categories of children with special needs and strategies, which could be effective in handling these children. The person should have professional training with exposure to various courses, for example, human development and personality, psychology of exceptional child, counseling techniques, data interpretation and children's record maintenance. This will help the children in Rehabilitation Schools to understand and accept themselves and make plans to develop educationally, vocationally and socially.

7. Mingling petty offenders with hard core criminals will only afford them a chance to undergo further training in crime. Therefore hard-core offenders should be isolated from
the first offenders. Some of the cases that are not very serious should instead of going through the courts be handled by social workers, field workers and counselors through parents / guardians of the respective children. The follow up process by the field workers should be intensified so as to monitor the conduct of respective boys and girls who graduate from the Rehabilitation Schools to prevent the recurrence of behavior problems.

8. For those who do not want to proceed on with their education beyond class 8, placement officers should make arrangements with the Government and other Organizations to procure some loans for these young people to enable them to start business to help them adjust to normal life. For those who want to proceed to secondary schools and colleges their records should be monitored to check whether their behavior has improved.

9. There should be collaboration between the Ministry of Education and the Ministry of Home Affairs and National Heritage in providing funds, resources, trained teachers among others in order to ensure that education of children in Rehabilitation Schools is effectively carried on.

Not all the solutions provided to solving the pedagogical constraints in the learning of children with emotional and behavioral disorders in Rehabilitation Schools are to be implemented at once. However the Government and the school administration should pick on a few and check their effectiveness. If this is done consistently, the teachers will be assisted and the learning of children in Rehabilitation Schools will be effective.
5.4 Suggestions for Further Research

Due to the limited scope of this study, the researcher was not able to carry out extensive research on learning of children with emotional and behavioral disorders in Rehabilitation Schools. Therefore, the researcher would like to make suggestions of areas in which further research can be carried out. These include:

- Effective ways of providing funds for Rehabilitation Schools.
- A study of inclusion of children with mild emotional and behavioral disorders in regular schools when it is effected in Kenya since the world has embraced the concept of inclusive education of children with special needs.
- There is also need to establish who is concerned with the inspection of the Rehabilitation Schools since they are under a different ministry.
- There is also need to research on issue of secondary transfer (placement) after the children leave the program when court orders are revoked.
REFERENCES


Department for International Development (DFID) 2000, Disability, Poverty and Development, DFID, UK.


Put a tick (✓) in the bracket corresponding to your answer and explain where spaces have been left.

- **Teacher Education**
  - What is your level of teaching?
    - [ ] Kindergarten
    - [ ] Elementary
    - [ ] High school
    - [ ] College
    - [ ] Graduate

- **Gender**
  - [ ] Male
  - [ ] Female

- **Age**
  - [ ] 0-10
  - [ ] 11-20
  - [ ] 21-30
  - [ ] 31-40
  - [ ] 41-50
  - [ ] 51-60
  - [ ] 61-70
  - [ ] 71-80

(8) **FCE/IELTS**
(9) **TOEFL/PTE/CAE/CAMBRIDGE**
(10) **B.Sc/MBA
APPENDIX A

QUESTIONNAIRE FOR TEACHERS

This questionnaire is designed to obtain information on pedagogical constraints in the learning of children in Rehabilitation Schools. The information that you will supply will be treated as confidential and will not be used in any way against you. Ideas from various teachers will be combined in such a way that your identity will not be revealed. Instructions are given on how to respond.

Put a tick (√) in the bracket corresponding to your answer and explain where spaces have been left.

Name of the institution

Date Class/Level of teaching

Year

Gender Male ( ) Female ( ) Age ( )

1. What is your highest educational level?
   (a) KCE / EACE / GCE / KCSE ( )
   (b) KACE / EAACE / HSC ( )
   (c) B.ED / B.Sc / BA ( )

Others (Specify).
2. Your professional qualification is?
   a) P4 ( )
   b) P3 ( )
   c) P2 ( )
   d) P1 ( )
   e) S1 ( )
   f) BED ( )

3. What is your teaching experience?
   a) 0-3 years ( )
   b) 4-6 years ( )
   a) 7-10 years ( )
   b) 11 years and above ( )

4. a. In teaching children with emotional and behavior disorders, I am
   a) Specially trained ( )
   b) Not specially trained ( )

   b. How frequent have attended any in-service course on special needs education?
   a) Not attended any course ( )
   b) Attended between 1-2 ( )
   c) Attended over 3 times ( )

5. Which of the following methods of teaching do you commonly use in your class?
   (a) Lecture ( )
   (b) Discussion ( )
6. Which one of the following factors greatly influences your choice of teaching methods?

(a) Provision of required facilities, materials and textbooks. ( )
(b) Class size. ( )
(c) Teaching load. ( )
(d) Class Discipline ( )
(e) Others (Specify) ____________________________

7. When teaching, what do you do to capture the learners' attention in class?

a) Persuading ( )
(b) Bell ( )
(c) Mention of child's name ( )
(d) Others specify ____________________________

8. What do you do to manage children's behavioral disorders in class to maintain class?

a) Caning ( )
(b) Rewarding ( )
(c) Scolding ( )
(d) Calling Pupil's name ( )
e) Time out
f) Good behavior games

g) Medication
h) Others specify

9. i) Do you use rewards to encourage or motivate pupils to learn?
   Yes ( )   No ( )

   ii) If yes, which types of rewards do you use?
       a) Verbal ( )
       b) Material ( )
       c) Recognition ( )
       d) Others specify

10. i) How often do you use teaching aids when teaching?
    a) Use them always ( )
    b) Use them rarely ( )
    c) Never use them ( )

   ii) The teaching resources in your school are?
       a) Adequate ( )
       b) Inadequate ( )

   iii) How often do you use adapted resource materials while teaching?
11. Which of the constraints outlined below do you face while teaching children with emotional and behavior disorders.

a) Inappropriate behaviors exhibited by the pupils ( )
   Explain

b) Lack of facilities ( )
   Explain

c) Lack of material and equipment ( )
   Explain

d) Lack of motivation ( )
   Explain

e) Overworking ( )
   Explain

Others specify

---

Kenya University Library
ii). Suggest ways of solving the above problems.

<table>
<thead>
<tr>
<th>Problem</th>
<th>Suggested solution</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Inappropriate behavior exhibited by children</td>
<td></td>
</tr>
<tr>
<td>b) Lack of facilities</td>
<td></td>
</tr>
<tr>
<td>c) Lack of adapted material and equipment</td>
<td></td>
</tr>
<tr>
<td>d) Lack of motivation</td>
<td></td>
</tr>
<tr>
<td>c) Overworking</td>
<td></td>
</tr>
<tr>
<td>d) Others specify</td>
<td></td>
</tr>
</tbody>
</table>

12. Make any other comments on what needs to be done by the government to make teaching in Rehabilitation Schools more effective?
APPENDIX B

QUESTIONNAIRE FOR CHILDREN

This questionnaire is designed to obtain information on pedagogical constraints in the learning taking place in your school. The information that you supply will be treated as confidential and cannot be used in any way against you.

INSTRUCTIONS

Answer the following questions as honestly as possible. You are reminded that your response will be treated with utmost confidentiality. Put a tick (√) in the bracket corresponding to your answer and explain where spaces have been left.

Name ____________________________________________________________

School ____________________________________________________________

Sex Male ( ) Female ( )

Age __________________________

Class _________________________

1. How many brothers and sisters do you have?
   a) Number of brothers ( )
   b) Number of sisters ( )

2. What reasons made you come to the Rehabilitation School?
   a) Care and protection ( )
   b) Discipline. ( )
   c) Others ( )
3. How do you feel about your academic performance?
   a) I am satisfied ( )
   b) I think I should do better ( )

4. How far do you hope to go with your education?
   a) Stop at standard 8 ( )
   b) Proceed up to form 4 ( )
   c) Proceed to diploma level ( )
   d) Enroll for a degree in university ( )

5. Name three subjects in which you perform very well.
   (1.) ____________________________
   (2.) ____________________________
   (3.) ____________________________

6. What do you think makes you do well in these subjects
   a) Good teaching? Yes ( ) No ( )
   b) They are more interesting to learn? Yes ( ) No ( )
   c) Personal ability? Yes ( ) No ( )
   d) Hard work? Yes ( ) No ( )

7. What methods of teaching does your teacher use while teaching in class
   Lecture ( )
   Discussion ( )
   Individualized attention ( )
Group teaching ( )

8. Do you have enough class text books for learning in your school?
   Yes ( ) No ( )

9. When you misbehave in class how does your teacher correct you?

10. How do you feel about being placed in the Rehabilitation School?
    a) Appropriate ( )
    b) Not appropriate ( )

11. Do you know the reason as to why your mates (peers) are in the Rehabilitation School?
    a) Yes ( ) b) No ( )
    iii) If yes, write why?

12. i) Do your peers influence you to do the activities they do?
    a) Yes ( ) b) No ( )
    ii) If yes which activities?

THANK YOU FOR YOUR COOPERATION
APPENDIX C

QUESTIONNAIRE FOR HEADTEACHERS

The purpose of this study is to find out pedagogical constraints in the learning of children with emotional and behavior disorders in Rehabilitation Schools. The information so obtained shall be exclusively confidential and will not be used in any way against you. You do not have to write your name anywhere in this questionnaire.

Please answer all questions by putting a tick in the brackets and give explanations where necessary.

Name of your school?

No. of children: Boys ________ Girls ____________

State your gender: male ( )

Female ( )

1. State your highest academic qualification:

'O' Level ( )

'A' Level ( )

Degree ( )

Others (specify______________________)

2. State your highest professional qualification:

PI ( )

S1\Diploma ( )

B.Ed ( )
3. For how long have you been a Head teacher?
   - 0-5 years ( )
   - 5-10 years ( )
   - Over 10 years ( )

4. What is the academic qualification of your staff?
   - K.C.S.C/K.C.E KACE ( )
   - BED ( )
   - Diploma ( )
   - Masters Degree ( )

5. State the number of trained teachers in the area of Special Needs Education in your school.

6. State the number of teachers who have received in-service on handling children with emotional and behavior disorders in your school.

7.i) Resource materials for learning for each child in your school are?
   a) adequate ( )
   b) Inadequate ( )

8. Adapted resource materials for learning are?
9. What Instructional strategies do teachers use to teach learners in your school?

- Individualized Education Program ( )
- Discussion ( )
- Lecture ( )
- Group teaching ( )

10. How do you manage behavior problems exhibited by learners in your school?

- Corporal punishment ( )
- Reinforcement ( )
- Medication ( )
- Time out ( )

11. What in your opinion do you feel are some of the factors that hinder the effective learning of children in your school?

12. What do you suggest the Government should do to solve some of these problems?

THANK YOU, FOR YOUR CO-OPERATION
APPENDIX D

LESSON OBSERVATION SCHEDULE

Class: __________________ Subject: ____________________________________________

Time: ________________ Topic: _______________________________________________

OBJECTIVE

Lesson Preparation

1. Schemes of Work

1.a). Does the teacher have a scheme of work?
   
   Yes ( )  No ( )

   b). Does the teacher have a lesson plan?
   
   Yes ( )  No ( )

   C) Do the teachers use IEPs while teaching?
   
   Yes ( )  No ( )

2. Resources

   a). Does he/she indicate against every topic the materials to be used?
   
   Yes ( )  No ( )

   b). What are these materials (a Checklist of materials and equipment)?
   
   (i) Chalkboard

   (ii) Maps

   (iii) Cards

   (iv) Charts

   (v) Signs
(vi) Films
(vii) Radio
(viii) Records
(ix) Slides
(x) Puppets
(xi) Scenery photographs
(xii) Drawings
(xiii) Models
(xiv) Real (real things objects)
(xv) Projectors (slides, films)
(xvi) Others (Specify)

________________________________________________________________________

________________________________________________________________________
c). Use of materials and equipment by the teachers

How does the teacher use the teaching learning resources?

i). To start off the discussions ( )

ii). To illustrate a visual ( )

iii). For revision ( )

iv). To introduce a lesson ( )

v). To give notes/summary ( )

vi. To capture pupils attention ( )

vii. Others (specify) ___________________________________________________________________
4. Class management

a). How do teachers organize the pupils while teaching and using various resources?

i. Whole class teaching ( )

ii. Individual ( )

iii. Group teaching ( )

b). If pupils are using the materials and equipment, does the teacher

i. Give general instruction before use ( )

ii. Move from one individual group to another ( )

iii. Just sits/stands in front of the class ( )

5. Instructional Strategies

a). Does the teacher write on the blackboard?

Yes ( ) No ( )

b). Does he/she obstruct pupils from seeing what he/she is writing on the chalkboard or what is displayed in front?

Yes ( ) No ( )

c). Does the teacher talk to the chalkboard or to the pupils as he writes?

Yes ( ) No ( )

6. Which methods of teaching does the teacher use?

Lecture ( )

Discussion ( )

Question/answer ( )

Demonstration ( )
6. Behavior modification

a) Does the teacher manage the class well?
   Yes ( ) No ( )

b) What strategies does she use to manage the class?

8. Inappropriate behaviors exhibited by the learners

a) ____________________________________________

b) ____________________________________________

9. Any other relevant observation?